

<b>United States Bankruptcy Court</b> <b>Northern District of Illinois, Eastern Division</b>						<b>Voluntary Petition</b>	
Name of Debtor (if individual, enter Last, First, Middle): <b>Newman, Patrice R.</b>				Name of Joint Debtor (Spouse) (Last, First, Middle):			
All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names):				All Other Names used by the Joint Debtor in the last 8 years (include married, maiden, and trade names):			
Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) /Complete EIN (if more than one, state all): <b>4949</b>				Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) /Complete EIN (if more than one, state all):			
Street Address of Debtor (No. & Street, City, State & Zip Code): <b>13707 S Stewart Ave</b> <b>Riverdale, IL</b>				Street Address of Joint Debtor (No. & Street, City, State & Zip Code):			
ZIPCODE <b>60827-1634</b>				ZIPCODE			
County of Residence or of the Principal Place of Business: <b>Cook</b>				County of Residence or of the Principal Place of Business:			
Mailing Address of Debtor (if different from street address) <b>PO Box 277876</b> <b>Riverdale, IL</b>				Mailing Address of Joint Debtor (if different from street address):			
ZIPCODE <b>60827-7876</b>				ZIPCODE			
Location of Principal Assets of Business Debtor (if different from street address above):							
ZIPCODE							
<b>Type of Debtor</b> (Form of Organization) (Check <b>one</b> box.)  <input checked="" type="checkbox"/> Individual (includes Joint Debtors) <i>See Exhibit D on page 2 of this form.</i> <input type="checkbox"/> Corporation (includes LLC and LLP) <input type="checkbox"/> Partnership <input type="checkbox"/> Other (If debtor is not one of the above entities, check this box and state type of entity below.)  <hr/> <b>Chapter 15 Debtor</b> Country of debtor's center of main interests:  Each country in which a foreign proceeding by, regarding, or against debtor is pending:		<b>Nature of Business</b> (Check <b>one</b> box.)  <input type="checkbox"/> Health Care Business <input type="checkbox"/> Single Asset Real Estate as defined in 11 U.S.C. § 101(51B) <input type="checkbox"/> Railroad <input type="checkbox"/> Stockbroker <input type="checkbox"/> Commodity Broker <input type="checkbox"/> Clearing Bank <input type="checkbox"/> Other  <hr/> <b>Tax-Exempt Entity</b> (Check box, if applicable.) <input type="checkbox"/> Debtor is a tax-exempt organization under Title 26 of the United States Code (the Internal Revenue Code).		<b>Chapter of Bankruptcy Code Under Which  the Petition is Filed</b> (Check <b>one</b> box.)  <input checked="" type="checkbox"/> Chapter 7 <input type="checkbox"/> Chapter 15 Petition for <input type="checkbox"/> Chapter 9      Recognition of a Foreign <input type="checkbox"/> Chapter 11      Main Proceeding <input type="checkbox"/> Chapter 12 <input type="checkbox"/> Chapter 15 Petition for <input type="checkbox"/> Chapter 13      Recognition of a Foreign Nonmain Proceeding  <hr/> <b>Nature of Debts</b> (Check <b>one</b> box.) <input checked="" type="checkbox"/> Debts are primarily consumer <input type="checkbox"/> Debts are primarily debts, defined in 11 U.S.C.      business debts. § 101(8) as "incurred by an individual primarily for a personal, family, or house- hold purpose."			
<b>Filing Fee</b> (Check one box)  <input checked="" type="checkbox"/> Full Filing Fee attached  <input type="checkbox"/> Filing Fee to be paid in installments (Applicable to individuals only). Must attach signed application for the court's consideration certifying that the debtor is unable to pay fee except in installments. Rule 1006(b). See Official Form 3A.  <input type="checkbox"/> Filing Fee waiver requested (Applicable to chapter 7 individuals only). Must attach signed application for the court's consideration. See Official Form 3B.		<b>Chapter 11 Debtors</b>  <b>Check one box:</b> <input type="checkbox"/> Debtor is a small business debtor as defined in 11 U.S.C. § 101(51D). <input type="checkbox"/> Debtor is not a small business debtor as defined in 11 U.S.C. § 101(51D).  <b>Check if:</b> <input type="checkbox"/> Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,490,925 ( <i>amount subject to adjustment on 4/01/16 and every three years thereafter</i> ). ----- <b>Check all applicable boxes:</b> <input type="checkbox"/> A plan is being filed with this petition <input type="checkbox"/> Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).					
<b>Statistical/Administrative Information</b> <input type="checkbox"/> Debtor estimates that funds will be available for distribution to unsecured creditors. <input checked="" type="checkbox"/> Debtor estimates that, after any exempt property is excluded and administrative expenses paid, there will be no funds available for distribution to unsecured creditors.							THIS SPACE IS FOR COURT USE ONLY
Estimated Number of Creditors <input type="checkbox"/> 1-49 <input type="checkbox"/> 50-99 <input checked="" type="checkbox"/> 100-199 <input type="checkbox"/> 200-999 <input type="checkbox"/> 1,000-5,000 <input type="checkbox"/> 5,001-10,000 <input type="checkbox"/> 10,001-25,000 <input type="checkbox"/> 25,001-50,000 <input type="checkbox"/> 50,001-100,000 <input type="checkbox"/> Over 100,000							
Estimated Assets <input checked="" type="checkbox"/> \$0 to \$50,000 <input type="checkbox"/> \$50,001 to \$100,000 <input type="checkbox"/> \$100,001 to \$500,000 <input type="checkbox"/> \$500,001 to \$1 million <input type="checkbox"/> \$1,000,001 to \$10 million <input type="checkbox"/> \$10,000,001 to \$50 million <input type="checkbox"/> \$50,000,001 to \$100 million <input type="checkbox"/> \$100,000,001 to \$500 million <input type="checkbox"/> \$500,000,001 to \$1 billion <input type="checkbox"/> More than \$1 billion							
Estimated Liabilities <input type="checkbox"/> \$0 to \$50,000 <input type="checkbox"/> \$50,001 to \$100,000 <input checked="" type="checkbox"/> \$100,001 to \$500,000 <input type="checkbox"/> \$500,001 to \$1 million <input type="checkbox"/> \$1,000,001 to \$10 million <input type="checkbox"/> \$10,000,001 to \$50 million <input type="checkbox"/> \$50,000,001 to \$100 million <input type="checkbox"/> \$100,000,001 to \$500 million <input type="checkbox"/> \$500,000,001 to \$1 billion <input type="checkbox"/> More than \$1 billion							

<b>Voluntary Petition</b> <i>(This page must be completed and filed in every case)</i>		Name of Debtor(s): <b>Newman, Patrice R.</b>	
<b>All Prior Bankruptcy Case Filed Within Last 8 Years</b> (If more than two, attach additional sheet)			
Location Where Filed: <b>Northern District of Illinois</b>		Case Number: <b>11-44671</b>	
Location Where Filed: <b>Northern District of Illinois</b>		Date Filed: <b>11/02/11</b>	
Location Where Filed: <b>Northern District of Illinois</b>		Case Number: <b>13-05329</b>	
Date Filed: <b>02/13/13</b>		Date Filed: <b>02/13/13</b>	
<b>Pending Bankruptcy Case Filed by any Spouse, Partner or Affiliate of this Debtor</b> (If more than one, attach additional sheet)			
Name of Debtor: <b>None</b>		Case Number:	
District:		Date Filed:	
Relationship:		Judge:	
<div style="text-align: center;"><b>Exhibit A</b></div> <p>(To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under chapter 11.)</p> <p><input type="checkbox"/> Exhibit A is attached and made a part of this petition.</p>		<div style="text-align: center;"><b>Exhibit B</b></div> <p>(To be completed if debtor is an individual whose debts are primarily consumer debts.)</p> <p>I, the attorney for the petitioner named in the foregoing petition, declare that I have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each such chapter. I further certify that I delivered to the debtor the notice required by 11 U.S.C. § 342(b).</p> <div style="display: flex; justify-content: space-between; margin-top: 20px;"> <span><b>X</b></span> <span><b>10/01/15</b></span> </div> <div style="display: flex; justify-content: space-between; font-size: small; margin-top: 5px;"> <span>Signature of Attorney for Debtor(s)</span> <span>Date</span> </div>	
<div style="text-align: center;"><b>Exhibit C</b></div> <p>Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety?</p> <p><input type="checkbox"/> Yes, and Exhibit C is attached and made a part of this petition.</p> <p><input checked="" type="checkbox"/> No</p>			
<div style="text-align: center;"><b>Exhibit D</b></div> <p>(To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.)</p> <p><input checked="" type="checkbox"/> Exhibit D completed and signed by the debtor is attached and made a part of this petition.</p> <p>If this is a joint petition:</p> <p><input type="checkbox"/> Exhibit D also completed and signed by the joint debtor is attached a made a part of this petition.</p>			
<div style="text-align: center;"><b>Information Regarding the Debtor - Venue</b></div> <p style="text-align: center;">(Check any applicable box.)</p> <p><input checked="" type="checkbox"/> Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District.</p> <p><input type="checkbox"/> There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District.</p> <p><input type="checkbox"/> Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District.</p>			
<div style="text-align: center;"><b>Certification by a Debtor Who Resides as a Tenant of Residential Property</b></div> <p style="text-align: center;">(Check all applicable boxes.)</p> <p><input type="checkbox"/> Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.)</p> <div style="margin-top: 10px;"> <div style="border-bottom: 1px solid black; width: 80%; margin: 0 auto;"></div> <div style="text-align: center; font-size: small;">(Name of landlord that obtained judgment)</div> </div> <div style="margin-top: 10px;"> <div style="border-bottom: 1px solid black; width: 80%; margin: 0 auto;"></div> <div style="text-align: center; font-size: small;">(Address of landlord)</div> </div> <p><input type="checkbox"/> Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and</p> <p><input type="checkbox"/> Debtor has included in this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition.</p> <p><input type="checkbox"/> Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(l)).</p>			

# **Voluntary Petition**

(This page must be completed and filed in every case)

Name of Debtor(s):

**Newman, Patrice R.**

## **Signatures**

### **Signature(s) of Debtor(s) (Individual/Joint)**

I declare under penalty of perjury that the information provided in this petition is true and correct.

[If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under Chapter 7] I am aware that I may proceed under chapter 7, 11, 12 or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7.

[If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. § 342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X



Signature of Debtor

**Patrice R. Newman**

X

Signature of Joint Debtor

Telephone Number (If not represented by attorney)

**September 29, 2015**

Date

### **Signature of a Foreign Representative**

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.

(Check only one box.)

☐ I request relief in accordance with chapter 15 of title 11, United States Code. Certified copies of the documents required by 11 U.S.C. § 1515 are attached.

☐ Pursuant to 11 U.S.C. § 1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

X

Signature of Foreign Representative

Printed Name of Foreign Representative

Date

### **Signature of Attorney\***

X



Signature of Attorney for Debtor(s)

**Michael R. Richmond 3124632**

**Heller & Richmond, Ltd.**

**33 N Dearborn St Ste 1907**

**Chicago, IL 60602-3828**

**(312) 781-6700 Fax: (312) 781-6732**

**mrichmond@hellerrichmond.com**

**September 29, 2015**

Date

\*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.

### **Signature of Debtor (Corporation/Partnership)**

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X

Signature of Authorized Individual

Printed Name of Authorized Individual

Title of Authorized Individual

Date

### **Signature of Non-Attorney Petition Preparer**

I declare under penalty of perjury that: 1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; 2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h) and 342(b); and 3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.

Printed Name and title, if any, of Bankruptcy Petition Preparer

Social Security Number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.) (Required by 11 U.S.C. § 110.)

Address

X

Signature

Date

Signature of Bankruptcy Petition Preparer or officer, principal, responsible person, or partner whose social security number is provided above.

Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

*A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both 11 U.S.C. § 110; 18 U.S.C. § 156.*



United States Bankruptcy Court  
Northern District of Illinois, Eastern Division

IN RE:

Case No. \_\_\_\_\_

Newman, Patrice R.

Chapter 7

Debtor(s)

**EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE  
CREDIT COUNSELING REQUIREMENT**

**Warning:** You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

*Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.*

☒ 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency.*

☐ 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. *You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 14 days after your bankruptcy case is filed.*

☐ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the seven days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. *[Summarize exigent circumstances here.]*

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

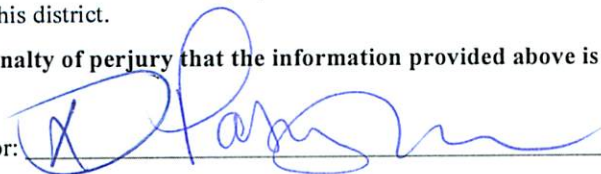
☐ 4. I am not required to receive a credit counseling briefing because of: *[Check the applicable statement.] [Must be accompanied by a motion for determination by the court.]*

- ☐ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or mental deficiency so as to be incapable of realizing and making rational decisions with respect to financial responsibilities.);
- ☐ Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or through the Internet.);
- ☐ Active military duty in a military combat zone.

☐ 5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.

**I certify under penalty of perjury that the information provided above is true and correct.**

Signature of Debtor:



Date: September 29, 2015

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United States Bankruptcy Court  
Northern District of Illinois, Eastern Division

IN RE:

Case No. \_\_\_\_\_

Newman, Patrice R.

Chapter 7

Debtor(s)

## SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors also must complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	Yes	1	\$ 0.00		
B - Personal Property	Yes	3	\$ 3,747.00		
C - Property Claimed as Exempt	Yes	1			
D - Creditors Holding Secured Claims	Yes	1		\$ 0.00	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	Yes	3		\$ 50,392.00	
F - Creditors Holding Unsecured Nonpriority Claims	Yes	30		\$ 114,766.91	
G - Executory Contracts and Unexpired Leases	Yes	1			
H - Codebtors	Yes	1			
I - Current Income of Individual Debtor(s)	Yes	2			\$ 2,328.24
J - Current Expenditures of Individual Debtor(s)	Yes	3			\$ 3,638.00
TOTAL		46	\$ 3,747.00	\$ 165,158.91	

**Document Page 6 of 85**  
**United States Bankruptcy Court**  
**Northern District of Illinois, Eastern Division**

**IN RE:**

Case No. \_\_\_\_\_

**Newman, Patrice R.**Chapter **7**

Debtor(s)

**STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)**

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C. § 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

☐ Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

**This information is for statistical purposes only under 28 U.S.C. § 159.****Summarize the following types of liabilities, as reported in the Schedules, and total them.**

<b>Type of Liability</b>	<b>Amount</b>
Domestic Support Obligations (from Schedule E)	\$ <b>0.00</b>
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	\$ <b>50,392.00</b>
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	\$ <b>0.00</b>
Student Loan Obligations (from Schedule F)	\$ <b>0.00</b>
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	\$ <b>0.00</b>
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	\$ <b>0.00</b>
<b>TOTAL</b>	\$ <b>50,392.00</b>

**State the following:**

Average Income (from Schedule I, Line 12)	\$ <b>2,328.24</b>
Average Expenses (from Schedule J, Line 22)	\$ <b>3,638.00</b>
Current Monthly Income (from Form 22A-1 Line 11; <b>OR</b> , Form 22B Line 14; <b>OR</b> , Form 22C-1 Line 14 )	\$ <b>3,035.44</b>

**State the following:**

1. Total from Schedule D, "UNSECURED PORTION, IF ANY" column		\$ <b>0.00</b>
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column.	\$ <b>50,392.00</b>	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		\$ <b>0.00</b>
4. Total from Schedule F		\$ <b>114,766.91</b>
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		\$ <b>114,766.91</b>

SCHEDULE A - REAL PROPERTY

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether the husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim."

If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

DESCRIPTION AND LOCATION OF PROPERTY	NATURE OF DEBTOR'S INTEREST IN PROPERTY	HUSBAND, WIFE, JOINT, OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION	AMOUNT OF SECURED CLAIM
None				
TOTAL			0.00	

(Report also on Summary of Schedules)

IN RE Newman, Patrice R.

Case No. \_\_\_\_\_

Debtor(s)

(If known)

**SCHEDULE B - PERSONAL PROPERTY**

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether the husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

**Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.**

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m).

TYPE OF PROPERTY	NONE	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT, OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
1. Cash on hand.	X			
2. Checking, savings or other financial accounts, certificates of deposit or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.		prepaid AmEx card		14.00
3. Security deposits with public utilities, telephone companies, landlords, and others.		Landlord		1,050.00
4. Household goods and furnishings, include audio, video, and computer equipment.		Misc household goods and furnishings		200.00
5. Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.	X			
6. Wearing apparel.		Necessary clothing		500.00
7. Furs and jewelry.	X			
8. Firearms and sports, photographic, and other hobby equipment.	X			
9. Interest in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.	X			
10. Annuities. Itemize and name each issue.	X			
11. Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).)	X			
12. Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.		401k		Unknown
13. Stock and interests in incorporated and unincorporated businesses. Itemize.	X			
14. Interests in partnerships or joint ventures. Itemize.	X			



IN RE Newman, Patrice R.

Case No.

Debtor(s)

(If known)

**SCHEDULE B - PERSONAL PROPERTY  
(Continuation Sheet)**

TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT, OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
15. Government and corporate bonds and other negotiable and non-negotiable instruments.	X			
16. Accounts receivable.	X			
17. Alimony, maintenance, support, and property settlements in which the debtor is or may be entitled. Give particulars.	X			
18. Other liquidated debts owed to debtor including tax refunds. Give particulars.	X			
19. Equitable or future interest, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.	X			
20. Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	X			
21. Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.	X			
22. Patents, copyrights, and other intellectual property. Give particulars.	X			
23. Licenses, franchises, and other general intangibles. Give particulars.	X			
24. Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	X			
25. Automobiles, trucks, trailers, and other vehicles and accessories.		2006 Pontiac Grand Prix 4dr Sedan (3.8L 6cyl 4A)		1,983.00
26. Boats, motors, and accessories.	X			
27. Aircraft and accessories.	X			
28. Office equipment, furnishings, and supplies.	X			
29. Machinery, fixtures, equipment, and supplies used in business.	X			
30. Inventory.	X			
31. Animals.	X			
32. Crops - growing or harvested. Give particulars.	X			
33. Farming equipment and implements.	X			
34. Farm supplies, chemicals, and feed.	X			

IN RE Newman, Patrice R.

Debtor(s)

Case No.

(If known)

**SCHEDULE B - PERSONAL PROPERTY**  
**(Continuation Sheet)**

TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT, OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
35. Other personal property of any kind not already listed. Itemize.	<b>X</b>			
<b>TOTAL</b>				<b>3,747.00</b>

0 continuation sheets attached

(Include amounts from any continuation sheets attached.  
Report total also on Summary of Schedules.)

IN RE Newman, Patrice R.

Case No. \_\_\_\_\_

Debtor(s)

(If known)

**SCHEDULE C - PROPERTY CLAIMED AS EXEMPT**Debtor elects the exemptions to which debtor is entitled under:  
(Check one box)☐ Check if debtor claims a homestead exemption that exceeds \$155,675. \*☐ 11 U.S.C. § 522(b)(2)☒ 11 U.S.C. § 522(b)(3)

DESCRIPTION OF PROPERTY	SPECIFY LAW PROVIDING EACH EXEMPTION	VALUE OF CLAIMED EXEMPTION	CURRENT VALUE OF PROPERTY WITHOUT DEDUCTING EXEMPTIONS
<b><u>SCHEDULE B - PERSONAL PROPERTY</u></b>			
prepaid AmEx card	735 ILCS 5/12-1001(b)	14.00	14.00
Landlord	735 ILCS 5/12-1001(b)	1,050.00	1,050.00
Misc household goods and furnishings	735 ILCS 5/12-1001(b)	200.00	200.00
Necessary clothing	735 ILCS 5/12-1001(a)	500.00	500.00
401k	735 ILCS 5/12-1006	100%	Unknown

\* Amount subject to adjustment on 4/1/16 and every three years thereafter with respect to cases commenced on or after the date of adjustment.

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is the creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H – Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim Without Deducting Value of Collateral" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion, if Any" on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND ACCOUNT NUMBER. <i>(See Instructions Above.)</i>	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
ACCOUNT NO.						0.00	
Title Max 933 E Sibley Blvd Dolton, IL 60419-2139		VALUE \$ 1,983.00					
ACCOUNT NO.							
		VALUE \$					
ACCOUNT NO.							
		VALUE \$					
ACCOUNT NO.							
		VALUE \$					
Subtotal (Total of this page)						\$	\$
Total (Use only on last page)						\$	\$

0 continuation sheets attached

(Report also on  
Summary of  
Schedules.)

(If applicable, report  
also on Statistical  
Summary of Certain  
Liabilities and Related  
Data.)

**SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS**

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of amounts not entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.

**TYPES OF PRIORITY CLAIMS** (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)

- ☐ **Domestic Support Obligations**  
Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).
- ☐ **Extensions of credit in an involuntary case**  
Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3).
- ☐ **Wages, salaries, and commissions**  
Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$12,475\* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).
- ☐ **Contributions to employee benefit plans**  
Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).
- ☐ **Certain farmers and fishermen**  
Claims of certain farmers and fishermen, up to \$6,150\* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).
- ☐ **Deposits by individuals**  
Claims of individuals up to \$2,775\* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).
- ☒ **Taxes and Certain Other Debts Owed to Governmental Units**  
Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).
- ☐ **Commitments to Maintain the Capital of an Insured Depository Institution**  
Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507(a)(9).
- ☐ **Claims for Death or Personal Injury While Debtor Was Intoxicated**  
Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

\* Amounts are subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.



IN RE Newman, Patrice R.

Case No. \_\_\_\_\_

Debtor(s)

(If known)

**SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS**  
**(Continuation Sheet)****Taxes and Other Certain Debts Owed to Governmental Units**

(Type of Priority for Claims Listed on This Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE AND ACCOUNT NUMBER. (See Instructions above.)	CODEBTR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT ENTITLED TO PRIORITY	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY
ACCOUNT NO. <b>3151</b> <b>Internal Revenue Service</b>	H	<b>TaxLienFederal account opened 10/6/2011</b>				<b>13,465.00</b>	<b>13,465.00</b>	
ACCOUNT NO. <b>COOK RECORDER OF DEEDS</b>		<b>Assignee or other notification for: Internal Revenue Service</b>						
ACCOUNT NO. <b>6070</b> <b>State of Illinois 509 S 6th St Springfield, IL 62701-1809</b>	H	<b>TaxLienState account opened 5/13/2014</b>				<b>3,678.00</b>	<b>3,678.00</b>	
ACCOUNT NO. <b>COOK RECORDER OF DEEDS</b>		<b>Assignee or other notification for: State of Illinois</b>						
ACCOUNT NO. <b>Unknown Plaintiff</b>	H	<b>TaxLienState account opened 5/13/2014</b>				<b>3,678.00</b>	<b>3,678.00</b>	
ACCOUNT NO. <b>COOK RECORDER OF DEEDS</b>		<b>Assignee or other notification for: Unknown Plaintiff</b>						

Sheet no. 1 of 2 continuation sheets attached to  
Schedule of Creditors Holding Unsecured Priority ClaimsSubtotal  
(Totals of this page)\$ **20,821.00** \$ **20,821.00** \$

Total

\$

(Use only on last page of the completed Schedule E. Report also on the Summary of Schedules.)

Total

(Use only on last page of the completed Schedule E. If applicable,  
report also on the Statistical Summary of Certain Liabilities and Related Data.)

\$

\$

IN RE Newman, Patrice R.

Case No. \_\_\_\_\_

Debtor(s)

(If known)

**SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS**  
**(Continuation Sheet)****Taxes and Other Certain Debts Owed to Governmental Units**

(Type of Priority for Claims Listed on This Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE AND ACCOUNT NUMBER. (See Instructions above.)	CODEBTR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT ENTITLED TO PRIORITY	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY
ACCOUNT NO. <b>Unknown Plaintiff</b>	H	<b>TaxLienFederal account opened 10/6/2011</b>				<b>13,465.00</b>	<b>13,465.00</b>	
ACCOUNT NO. <b>COOK COUNTY REG CHICAG</b>		<b>Assignee or other notification for: Unknown Plaintiff</b>						
ACCOUNT NO. <b>Unknown Plaintiff</b>	H	<b>TaxLienState account opened 4/13/2011</b>				<b>2,641.00</b>	<b>2,641.00</b>	
ACCOUNT NO. <b>COOK RECORDER OF DEEDS</b>		<b>Assignee or other notification for: Unknown Plaintiff</b>						
ACCOUNT NO. <b>3151</b> <b>Unknown Plaintiff</b>	H	<b>TaxLienFederal account opened 10/6/2011</b>				<b>13,465.00</b>	<b>13,465.00</b>	
ACCOUNT NO. <b>COOK COUNTY, ILLINOIS</b>		<b>Assignee or other notification for: Unknown Plaintiff</b>						

Sheet no. **2** of **2** continuation sheets attached to  
Schedule of Creditors Holding Unsecured Priority ClaimsSubtotal  
(Totals of this page)\$ **29,571.00** \$ **29,571.00** \$

Total

\$ **50,392.00**

(Use only on last page of the completed Schedule E. Report also on the Summary of Schedules.)

Total

(Use only on last page of the completed Schedule E. If applicable,  
report also on the Statistical Summary of Certain Liabilities and Related Data.)\$ **50,392.00** \$

IN RE Newman, Patrice R.

Case No. \_\_\_\_\_

Debtor(s)

(If known)

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding unsecured nonpriority claims to report on this Schedule F.

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 8742 01 Village of Hazel Crest 3000 W 170th PI Hazel Crest, IL 60429-1175	H	Open account Unknown				250.00
ACCOUNT NO. McSi Inc PO Box 327 Palos Heights, IL 60463-0327		Assignee or other notification for: 01 Village of Hazel Crest				
ACCOUNT NO. 8634 01 Village of Hazel Crest 3000 W 170th PI Hazel Crest, IL 60429-1175	H	Open account Unknown				250.00
ACCOUNT NO. McSi Inc PO Box 327 Palos Heights, IL 60463-0327		Assignee or other notification for: 01 Village of Hazel Crest				
Subtotal (Total of this page)						\$ 500.00
Total (Use only on last page of the completed Schedule F. Report also on the Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)						\$

29 continuation sheets attached

IN RE Newman, Patrice R.

Debtor(s)

Case No. \_\_\_\_\_

(If known)

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
**(Continuation Sheet)**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 2526 01 Village of Riverdale 157 W 144th St Riverdale, IL 60827-2707	H	Open account Unknown				0.00
ACCOUNT NO. McSi Inc PO Box 327 Palos Heights, IL 60463-0327		Assignee or other notification for: 01 Village of Riverdale				
ACCOUNT NO. 1665 04 City of Elgin 150 Dexter Ct Elgin, IL 60120-5527	H	Open account Unknown				100.00
ACCOUNT NO. Municollofam 3348 Ridge Rd Lansing, IL 60438-3112		Assignee or other notification for: 04 City of Elgin				
ACCOUNT NO. 6404 10 Peoples Gas Light and Coke 266 200 E Randolph St Chicago, IL 60601-6436	H	Open account Unknown				151.00
ACCOUNT NO. Cci PO Box 2207 Augusta, GA 30903-2207		Assignee or other notification for: 10 Peoples Gas Light and Coke 266				
ACCOUNT NO. 2652 Acs/jp Morgan Chase Ba 2277 E 22 oth St Long Beach, CA 90810	H	Installment account 2008-05-01				1.00

Sheet no. 1 of 29 continuation sheets attached to  
Schedule of Creditors Holding Unsecured Nonpriority ClaimsSubtotal  
(Total of this page) \$ **250.00**(Use only on last page of the completed Schedule F. Report also on  
the Summary of Schedules, and if applicable, on the Statistical  
Summary of Certain Liabilities and Related Data.)  
Total  
\$

IN RE Newman, Patrice R.

Case No. \_\_\_\_\_

Debtor(s)

(If known)

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
**(Continuation Sheet)**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM, IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 9491 <b>Acs/jpmchase</b> <b>2277 E 22 oth St</b> <b>Long Beach, CA 90810</b>	<b>H</b>	<b>Installment account</b> <b>2008-05-13</b>				<b>0.00</b>
ACCOUNT NO. <b>Americash Loans LLC</b> <b>PO Box 184</b> <b>Des Plaines, IL 60016-0003</b>	<b>H</b>	<b>Judgment account opened Unknown</b> <b>04 M1 178056</b> <b>11/17/04</b>				<b>1,086.00</b>
ACCOUNT NO. <b>Gary A. Smiley</b> <b>4741 N Western Ave</b> <b>Chicago, IL 60625-2012</b>		<b>Assignee or other notification for:</b> <b>Americash Loans LLC</b>				
ACCOUNT NO. <b>Armon</b> <b>6N048 Old Homestead Rd</b> <b>Saint Charles, IL 60175-6126</b>						<b>200.00</b>
ACCOUNT NO. <b>Asset Acceptance</b> <b>28405 Van Dyke Ave</b> <b>Warren, MI 48093-7132</b>		<b>06 M1 106019</b> <b>1/27/06</b>				<b>532.43</b>
ACCOUNT NO. <b>Sanjay Jutla</b> <b>11 E Adams St # 906</b> <b>Chicago, IL 60603-6306</b>		<b>Assignee or other notification for:</b> <b>Asset Acceptance</b>				
ACCOUNT NO. <b>Associates of Triangle</b> <b>PO Box 577798</b> <b>Chicago, IL 60657-7339</b>						<b>3,000.00</b>

Sheet no. 2 of 29 continuation sheets attached to  
Schedule of Creditors Holding Unsecured Nonpriority ClaimsSubtotal  
(Total of this page) \$ **4,818.43**(Use only on last page of the completed Schedule F. Report also on  
the Summary of Schedules, and if applicable, on the Statistical  
Summary of Certain Liabilities and Related Data.)  
Total  
\$



IN RE Newman, Patrice R.

Case No. \_\_\_\_\_

Debtor(s)

(If known)

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
**(Continuation Sheet)**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 7381 AT&T Bankruptcy Dept AT& T Bankruptcy Department PO Box 769 Arlington, TX 76004-0769		2/17/11				575.00
ACCOUNT NO. Enhanced Recovery Company, LLC PO Box 23870 Jacksonville, FL 32241-3870		Assignee or other notification for: AT&T Bankruptcy Dept				
ACCOUNT NO. 0001 AT&T Bankruptcy Dept AT& T Bankruptcy Department PO Box 769 Arlington, TX 76004-0769	H	Open account 2015-06-01				1,702.00
ACCOUNT NO. I C System Inc PO Box 64378 Saint Paul, MN 55164-0378		Assignee or other notification for: AT&T Bankruptcy Dept				
ACCOUNT NO. Ic System Attn: Bankruptcy 444 Highway 96 E Saint Paul, MN 55127-2557		Assignee or other notification for: AT&T Bankruptcy Dept				
ACCOUNT NO. 5001 AT&T Bankruptcy Dept AT& T Bankruptcy Department PO Box 769 Arlington, TX 76004-0769	H	Open account 2015-03-01				267.00
ACCOUNT NO. I C System Inc PO Box 64378 Saint Paul, MN 55164-0378		Assignee or other notification for: AT&T Bankruptcy Dept				

Sheet no. 3 of 29 continuation sheets attached to  
Schedule of Creditors Holding Unsecured Nonpriority ClaimsSubtotal  
(Total of this page) \$ **2,544.00**(Use only on last page of the completed Schedule F. Report also on  
the Summary of Schedules, and if applicable, on the Statistical  
Summary of Certain Liabilities and Related Data.)  
Total  
\$

IN RE Newman, Patrice R.

Case No. \_\_\_\_\_

Debtor(s)

(If known)

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
**(Continuation Sheet)**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. <b>Ic System</b> <b>Attn: Bankruptcy</b> <b>444 Highway 96 E</b> <b>Saint Paul, MN 55127-2557</b>		<b>Assignee or other notification for:</b> <b>AT&amp;T Bankruptcy Dept</b>				
ACCOUNT NO. <b>9598</b> <b>AT&amp;T Bankruptcy Dept</b> <b>AT&amp; T Bankruptcy Department</b> <b>PO Box 769</b> <b>Arlington, TX 76004-0769</b>	<b>H</b>	<b>Open account</b> <b>Unknown</b>				<b>80.00</b>
ACCOUNT NO. <b>Afni</b> <b>PO Box 3097</b> <b>Bloomington, IL 61702-3097</b>		<b>Assignee or other notification for:</b> <b>AT&amp;T Bankruptcy Dept</b>				
ACCOUNT NO. <b>Afni</b> <b>Attention: Bankruptcy</b> <b>1310 Martin Luther King Dr</b> <b>Bloomington, IL 61701-1465</b>		<b>Assignee or other notification for:</b> <b>AT&amp;T Bankruptcy Dept</b>				
ACCOUNT NO. <b>2001</b> <b>AT&amp;T Bankruptcy Dept</b> <b>AT&amp; T Bankruptcy Department</b> <b>PO Box 769</b> <b>Arlington, TX 76004-0769</b>	<b>H</b>	<b>Open account</b> <b>2013-02-01</b>				<b>80.00</b>
ACCOUNT NO. <b>I C System Inc</b> <b>PO Box 64378</b> <b>Saint Paul, MN 55164-0378</b>		<b>Assignee or other notification for:</b> <b>AT&amp;T Bankruptcy Dept</b>				
ACCOUNT NO. <b>Ic System</b> <b>Attn: Bankruptcy</b> <b>444 Highway 96 E</b> <b>Saint Paul, MN 55127-2557</b>		<b>Assignee or other notification for:</b> <b>AT&amp;T Bankruptcy Dept</b>				

Sheet no. 4 of 29 continuation sheets attached to  
Schedule of Creditors Holding Unsecured Nonpriority ClaimsSubtotal  
(Total of this page) \$ **160.00**(Use only on last page of the completed Schedule F. Report also on  
the Summary of Schedules, and if applicable, on the Statistical  
Summary of Certain Liabilities and Related Data.)  
Total  
\$

IN RE Newman, Patrice R.

Debtor(s)

Case No. \_\_\_\_\_

(If known)

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
**(Continuation Sheet)**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. <b>8288</b> <b>AT&amp;T Bankruptcy Dept</b> <b>AT&amp; T Bankruptcy Department</b> <b>PO Box 769</b> <b>Arlington, TX 76004-0769</b>		<b>12/01/10</b>				<b>179.00</b>
ACCOUNT NO. <b>West Asset Management</b> <b>1000 N Travis St Ste F</b> <b>Sherman, TX 75090-5054</b>		<b>Assignee or other notification for:</b> <b>AT&amp;T Bankruptcy Dept</b>				
ACCOUNT NO. <b>4034</b> <b>AT&amp;T Wireless Bankruptcy Dept.</b> <b>AT&amp;T Wireless Bankruptcy Dept.</b> <b>PO Box 309</b> <b>Portland, OR 97207-0309</b>	<b>H</b>	<b>Open account</b> <b>2015-07-01</b>				<b>2,792.00</b>
ACCOUNT NO. <b>Afni, Inc.</b> <b>PO Box 3097</b> <b>Bloomington, IL 61702-3097</b>		<b>Assignee or other notification for:</b> <b>AT&amp;T Wireless Bankruptcy Dept.</b>				
ACCOUNT NO. <b>Afni</b> <b>Attention: Bankruptcy</b> <b>1310 Martin Luther King Dr</b> <b>Bloomington, IL 61701-1465</b>		<b>Assignee or other notification for:</b> <b>AT&amp;T Wireless Bankruptcy Dept.</b>				
ACCOUNT NO. <b>1234</b> <b>BANK OF AMERICA, Headquarters</b> <b>100 N Tryon St</b> <b>Charlotte, NC 28202-4000</b>						<b>Unknown</b>
ACCOUNT NO. <b>0700</b> <b>Baxter Credit Union</b> <b>400 Lakeview Pkwy</b> <b>Vernon Hills, IL 60061-1843</b>	<b>H</b>	<b>Installment account</b> <b>2011-05-01</b>				<b>1,364.00</b>

Sheet no. **5** of **29** continuation sheets attached to  
Schedule of Creditors Holding Unsecured Nonpriority ClaimsSubtotal  
(Total of this page) \$ **4,335.00**(Use only on last page of the completed Schedule F. Report also on  
the Summary of Schedules, and if applicable, on the Statistical  
Summary of Certain Liabilities and Related Data.)  
Total  
\$

IN RE Newman, Patrice R.

Case No. \_\_\_\_\_

Debtor(s)

(If known)

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
**(Continuation Sheet)**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM, IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. <b>Baxter Ecu/BCU</b> <b>340 N Milwaukee Ave</b> <b>Vernon Hills, IL 60061-1533</b>		<b>Assignee or other notification for:</b> <b>Baxter Credit Union</b>				
ACCOUNT NO. <b>6IIG</b> <b>Benedictine University</b> <b>5700 College Rd</b> <b>Lisle, IL 60532-2851</b>		<b>5/19/11</b>				<b>7,705.00</b>
ACCOUNT NO. <b>Western Control Services</b> <b>730 W Hampden Ave Ste 30</b> <b>Englewood, CO 80110-2120</b>		<b>Assignee or other notification for:</b> <b>Benedictine University</b>				
ACCOUNT NO. <b>7500</b> <b>Cap One</b> <b>PO Box 85520</b> <b>Richmond, VA 23285-5520</b>		<b>04/12/11</b>				<b>457.00</b>
ACCOUNT NO. <b>6034</b> <b>Capital One</b> <b>PO Box 5253</b> <b>Carol Stream, IL 60197-5253</b>	<b>H</b>	<b>Revolving account</b> <b>2012-06-09</b>				<b>0.00</b>
ACCOUNT NO. <b>3634</b> <b>Capital One Bank USA N</b> <b>PO Box 30281</b> <b>Salt Lake City, UT 84130-0281</b>	<b>H</b>	<b>Revolving account</b> <b>2014-05-01</b>				<b>905.00</b>
ACCOUNT NO. <b>Capital One</b> <b>Attn: Bankruptcy</b> <b>PO Box 30285</b> <b>Salt Lake City, UT 84130-0285</b>		<b>Assignee or other notification for:</b> <b>Capital One Bank USA N</b>				

Sheet no. 6 of 29 continuation sheets attached to  
Schedule of Creditors Holding Unsecured Nonpriority ClaimsSubtotal  
(Total of this page) \$ **9,067.00**(Use only on last page of the completed Schedule F. Report also on  
the Summary of Schedules, and if applicable, on the Statistical  
Summary of Certain Liabilities and Related Data.)  
Total  
\$

IN RE Newman, Patrice R.

Case No. \_\_\_\_\_

Debtor(s)

(If known)

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
**(Continuation Sheet)**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 2118 Capital One Bank USA N PO Box 30281 Salt Lake City, UT 84130-0281	H	Revolving account 2010-09-01				0.00
ACCOUNT NO. Capital One Attn: Bankruptcy PO Box 30285 Salt Lake City, UT 84130-0285		Assignee or other notification for: Capital One Bank USA N				
ACCOUNT NO. 7500 Capital One Bank USA N PO Box 30281 Salt Lake City, UT 84130-0281	H	Revolving account 2011-04-12				0.00
ACCOUNT NO. Capital One Attn: Bankruptcy PO Box 30285 Salt Lake City, UT 84130-0285		Assignee or other notification for: Capital One Bank USA N				
ACCOUNT NO. 8160 Cbna PO Box 6497 Sioux Falls, SD 57117-6497		09/01/09				344.00
ACCOUNT NO. 1465 Chase Bank PO Box 182223 Columbus, OH 43218-2223						702.76
ACCOUNT NO. 4920 Citi/Stdnt Ln Rsrc Cnt 701 E 60th St N Sioux Falls, SD 57104-0432	H	Installment account 2009-12-01				1.00

Sheet no. 7 of 29 continuation sheets attached to  
Schedule of Creditors Holding Unsecured Nonpriority ClaimsSubtotal  
(Total of this page) \$ **1,045.76**(Use only on last page of the completed Schedule F. Report also on  
the Summary of Schedules, and if applicable, on the Statistical  
Summary of Certain Liabilities and Related Data.)  
Total  
\$



IN RE Newman, Patrice R.

Case No. \_\_\_\_\_

Debtor(s)

(If known)

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
**(Continuation Sheet)**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. <b>Citistudentln</b> <b>PO Box 95</b> <b>Sioux Falls, SD 57101-0095</b>		<b>Assignee or other notification for:</b> <b>Citi/Stdnt Ln Rsrc Cnt</b>				
ACCOUNT NO. <b>4921</b> <b>Citi/Stdnt Ln Rsrc Cnt</b> <b>701 E 60th St N</b> <b>Sioux Falls, SD 57104-0432</b>	<b>H</b>	<b>Installment account</b> <b>2009-12-01</b>				<b>1.00</b>
ACCOUNT NO. <b>Citistudentln</b> <b>PO Box 95</b> <b>Sioux Falls, SD 57101-0095</b>		<b>Assignee or other notification for:</b> <b>Citi/Stdnt Ln Rsrc Cnt</b>				
ACCOUNT NO. <b>6881</b> <b>Citibank</b> <b>701 E 60th St N</b> <b>Sioux Falls, SD 57104-0432</b>						<b>Unknown</b>
ACCOUNT NO. <b>City of Chicago</b> <b>Office of Dept of Finance</b> <b>121 N La Salle St Rm 107A</b> <b>Chicago, IL 60602-1232</b>		<b>Parking Ticket Fines</b> <b>IL License Plate No. X882099 and possibly other plates</b>				<b>1,500.00</b>
ACCOUNT NO. <b>4901</b> <b>Cmpptnrs/il Bened Coll</b> <b>PO Box 3176</b> <b>Winston Salem, NC 27102-3176</b>		<b>05/25/10</b>				<b>325.00</b>
ACCOUNT NO. <b>7701</b> <b>Cmpptnrs/II Bened Coll</b> <b>PO Box 3176</b> <b>Winston Salem, NC 27102-3176</b>	<b>H</b>	<b>Installment account</b> <b>2010-05-01</b>				<b>650.00</b>

Sheet no. 8 of 29 continuation sheets attached to  
Schedule of Creditors Holding Unsecured Nonpriority ClaimsSubtotal  
(Total of this page) \$ **2,474.00**(Use only on last page of the completed Schedule F. Report also on  
the Summary of Schedules, and if applicable, on the Statistical  
Summary of Certain Liabilities and Related Data.)  
Total  
\$

IN RE Newman, Patrice R.

Case No. \_\_\_\_\_

Debtor(s)

(If known)

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
**(Continuation Sheet)**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. <b>5651</b> <b>Comcast</b> <b>PO Box 3002</b> <b>Southeastern, PA 19398-3002</b>		<b>04/07/09</b>				<b>422.00</b>
ACCOUNT NO. <b>Credit Management LP</b> <b>4200 International Pkwy</b> <b>Carrollton, TX 75007-1912</b>		<b>Assignee or other notification for:</b> <b>Comcast</b>				
ACCOUNT NO. <b>1572</b> <b>Comcast</b> <b>PO Box 3002</b> <b>Southeastern, PA 19398-3002</b>	<b>H</b>	<b>Open account</b> <b>2015-01-01</b>				<b>244.00</b>
ACCOUNT NO. <b>Stellar Recovery Inc</b> <b>4500 Salisbury Rd Ste 10</b> <b>Jacksonville, FL 32216-0959</b>		<b>Assignee or other notification for:</b> <b>Comcast</b>				
ACCOUNT NO. <b>ComEd</b> <b>2100 Swift Dr</b> <b>Oak Brook, IL 60523-1559</b>						<b>1,171.77</b>
ACCOUNT NO. <b>5340</b> <b>Credit One Bank NA</b> <b>PO Box 98875</b> <b>Las Vegas, NV 89193-8875</b>	<b>H</b>	<b>Revolving account</b> <b>2014-09-01</b>				<b>645.00</b>
ACCOUNT NO. <b>First National Bank</b> <b>Attn: FNN Legal Dept</b> <b>1620 Dodge St Stop Code3290</b> <b>Omaha, NE 68197-0003</b>		<b>Assignee or other notification for:</b> <b>Credit One Bank NA</b>				

Sheet no. 9 of 29 continuation sheets attached to  
Schedule of Creditors Holding Unsecured Nonpriority ClaimsSubtotal  
(Total of this page) \$ **2,482.77**(Use only on last page of the completed Schedule F. Report also on  
the Summary of Schedules, and if applicable, on the Statistical  
Summary of Certain Liabilities and Related Data.)  
Total  
\$

IN RE Newman, Patrice R.

Case No. \_\_\_\_\_

Debtor(s)

(If known)

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
**(Continuation Sheet)**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. <b>Dept of Employment Security State of IL PO Box 7350 Chicago, IL 60680-7350</b>						<b>7,700.00</b>
ACCOUNT NO. 5665 <b>Dr John Irving DDS Pc 567 S Washington St Naperville, IL 60540-6756</b>	<b>H</b>	<b>Open account 2012-10-01</b>				<b>50.00</b>
ACCOUNT NO. <b>Atg Credit 1700 W Cortland St Ste 2 Chicago, IL 60622-1131</b>		<b>Assignee or other notification for: Dr John Irving DDS Pc</b>				
ACCOUNT NO. 3194 <b>Dreyer Medical Clinic c/o Illinois Collection Services 8231 185th St Tinley Park, IL 60487-9355</b>		<b>7/1/11</b>				<b>245.00</b>
ACCOUNT NO. 4235 <b>Ds Waters of America c/o CBA Collection Bureau 25954 Eden Landing Rd Hayward, CA 94545-3816</b>		<b>1/4/11</b>				<b>4,490.00</b>
ACCOUNT NO. 1305 <b>DuPage County Clerk c/o Alliance 6565 Kimball Dr Gig Harbor, WA 98335-1200</b>		<b>06/07/10</b>				<b>494.00</b>
ACCOUNT NO. 3402 <b>DuPage County Clerk c/o Alliance 6565 Kimball Dr Gig Harbor, WA 98335-1200</b>		<b>06/07/10</b>				<b>306.00</b>

Sheet no. 10 of 29 continuation sheets attached to  
Schedule of Creditors Holding Unsecured Nonpriority ClaimsSubtotal  
(Total of this page) \$ **13,285.00**(Use only on last page of the completed Schedule F. Report also on  
the Summary of Schedules, and if applicable, on the Statistical  
Summary of Certain Liabilities and Related Data.)  
Total  
\$

IN RE Newman, Patrice R.

Case No. \_\_\_\_\_

Debtor(s)

(If known)

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
**(Continuation Sheet)**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 5249 First Midwest Bank Joliet 300 N Hunt Club Rd Gurnee, IL 60031-2502	H	Open account Unknown				852.00
ACCOUNT NO. Trackers Inc 1970 Spruce Hills Dr Bettendorf, IA 52722-2681		Assignee or other notification for: First Midwest Bank Joliet				
ACCOUNT NO. 2671 First Premier Bank 601 S Minnesota Ave Sioux Falls, SD 57104-4824		09/05/07				194.00
ACCOUNT NO. 0492 First Premier Bank 601 S Minnesota Ave Sioux Falls, SD 57104-4824		05/11/08				612.00
ACCOUNT NO. 0492 First Premier Bank 601 S Minnesota Ave Sioux Falls, SD 57104-4824	H	Revolving account 2008-05-01				612.00
ACCOUNT NO. First Premier Bank PO Box 5524 Sioux Falls, SD 57117-5524		Assignee or other notification for: First Premier Bank				
ACCOUNT NO. 2671 First Premier Bank 601 S Minnesota Ave Sioux Falls, SD 57104-4824	H	Revolving account 2007-09-01				193.00

Sheet no. 11 of 29 continuation sheets attached to  
Schedule of Creditors Holding Unsecured Nonpriority ClaimsSubtotal  
(Total of this page) \$ **2,463.00**(Use only on last page of the completed Schedule F. Report also on  
the Summary of Schedules, and if applicable, on the Statistical  
Summary of Certain Liabilities and Related Data.)  
Total  
\$

IN RE Newman, Patrice R.

Debtor(s)

Case No. \_\_\_\_\_

(If known)

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
**(Continuation Sheet)**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. <b>First Premier Bank</b> <b>PO Box 5524</b> <b>Sioux Falls, SD 57117-5524</b>		<b>Assignee or other notification for:</b> <b>First Premier Bank</b>				
ACCOUNT NO. <b>3531</b> <b>Gecrb/sams Club</b> <b>PO Box 981400</b> <b>El Paso, TX 79998-1400</b>		<b>05/23/04</b>				<b>1,270.00</b>
ACCOUNT NO. <b>Genesis Financial Services</b> <b>3175 Commercial Ave Ste 201</b> <b>Northbrook, IL 60062-1924</b>						<b>300.00</b>
ACCOUNT NO. <b>8044</b> <b>Great American Finance</b> <b>20 N Wacker Dr Ste 2275</b> <b>Chicago, IL 60606-3096</b>	<b>H</b>	<b>Installment account</b> <b>2008-02-01</b>				<b>337.00</b>
ACCOUNT NO. <b>Great American Finance</b> <b>Attn: Bankruptcy</b> <b>20 N Wacker Dr Ste 2275</b> <b>Chicago, IL 60606-3096</b>		<b>Assignee or other notification for:</b> <b>Great American Finance</b>				
ACCOUNT NO. <b>9598</b> <b>Horizon Card</b> <b>1707 Warren Rd</b> <b>Indiana, PA 15701-2423</b>	<b>H</b>	<b>Revolving account</b> <b>2009-03-17</b>				<b>0.00</b>
ACCOUNT NO. <b>6034</b> <b>Hsbc Bank Nevada N.A.</b> <b>PO Box 2013</b> <b>Buffalo, NY 14240-2013</b>	<b>H</b>	<b>Open account</b> <b>2014-01-01</b>				<b>434.00</b>

Sheet no. **12** of **29** continuation sheets attached to  
Schedule of Creditors Holding Unsecured Nonpriority ClaimsSubtotal  
(Total of this page) \$ **2,341.00**(Use only on last page of the completed Schedule F. Report also on  
the Summary of Schedules, and if applicable, on the Statistical  
Summary of Certain Liabilities and Related Data.)  
Total  
\$

IN RE Newman, Patrice R.

Case No. \_\_\_\_\_

Debtor(s)

(If known)

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
**(Continuation Sheet)**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. <b>Portfolio Recovery Ass 120 Corporate Blvd Ste 1 Norfolk, VA 23502-4962</b>		<b>Assignee or other notification for: Hsbc Bank Nevada N.A.</b>				
ACCOUNT NO. <b>Portfolio Recovery Attn: Bankruptcy PO Box 41067 Norfolk, VA 23541-1067</b>		<b>Assignee or other notification for: Hsbc Bank Nevada N.A.</b>				
ACCOUNT NO. 9455 <b>Indiana Phys. Management LLC 2001 W 86th St Indianapolis, IN 46260-1902</b>	H	<b>Open account 2015-07-01</b>				<b>195.00</b>
ACCOUNT NO. <b>Imc Credit Services 6955 Hillside Ct Indianapolis, IN 46250-2054</b>		<b>Assignee or other notification for: Indiana Phys. Management LLC</b>				
ACCOUNT NO. <b>Imc Credit Services IMC Credit Services PO Box 20636 Indianapolis, IN 46220-0636</b>		<b>Assignee or other notification for: Indiana Phys. Management LLC</b>				
ACCOUNT NO. <b>Internal Revenue Service Insolvency Section PO Box 7346 Philadelphia, PA 19101-7346</b>		<b>back taxes greater than 3 years past due</b>				<b>13,465.00</b>
ACCOUNT NO. <b>Islander LLC 1924 Broadway St Blue Island, IL 60406-3054</b>		<b>07 M1 703621 2/14/07</b>				<b>3,850.00</b>

Sheet no. **13** of **29** continuation sheets attached to  
Schedule of Creditors Holding Unsecured Nonpriority ClaimsSubtotal  
(Total of this page) \$ **17,510.00**(Use only on last page of the completed Schedule F. Report also on  
the Summary of Schedules, and if applicable, on the Statistical  
Summary of Certain Liabilities and Related Data.)  
Total  
\$

IN RE Newman, Patrice R.

Case No. \_\_\_\_\_

Debtor(s)

(If known)

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
**(Continuation Sheet)**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. <b>Louis A. Weinstock 20 N Clark St Ste 2600 Chicago, IL 60602-5106</b>		<b>Assignee or other notification for: Islander LLC</b>				
ACCOUNT NO. <b>4902</b> <b>Jpm Chase PO Box 7013 Indianapolis, IN 46207-7013</b>	<b>H</b>	<b>Installment account 2008-05-13</b>				<b>0.00</b>
ACCOUNT NO. <b>Jp Morgan Chase Bank Attn: Bankruptcy PO Box 15298 Wilmington, DE 19850-5298</b>		<b>Assignee or other notification for: Jpm Chase</b>				
ACCOUNT NO. <b>4901</b> <b>Jpm Chase PO Box 7013 Indianapolis, IN 46207-7013</b>	<b>H</b>	<b>Installment account 2008-05-13</b>				<b>0.00</b>
ACCOUNT NO. <b>Jp Morgan Chase Bank Attn: Bankruptcy PO Box 15298 Wilmington, DE 19850-5298</b>		<b>Assignee or other notification for: Jpm Chase</b>				
ACCOUNT NO. <b>4904</b> <b>Jpm Chase PO Box 7013 Indianapolis, IN 46207-7013</b>	<b>H</b>	<b>Installment account 2009-02-10</b>				<b>0.00</b>
ACCOUNT NO. <b>Jp Morgan Chase Bank Attn: Bankruptcy PO Box 15298 Wilmington, DE 19850-5298</b>		<b>Assignee or other notification for: Jpm Chase</b>				

Sheet no. 14 of 29 continuation sheets attached to  
Schedule of Creditors Holding Unsecured Nonpriority ClaimsSubtotal  
(Total of this page) \$(Use only on last page of the completed Schedule F. Report also on  
the Summary of Schedules, and if applicable, on the Statistical  
Summary of Certain Liabilities and Related Data.)  
Total  
\$



IN RE Newman, Patrice R.

Case No. \_\_\_\_\_

Debtor(s)

(If known)

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
**(Continuation Sheet)**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. <b>4903</b> <b>Jpm Chase</b> <b>PO Box 7013</b> <b>Indianapolis, IN 46207-7013</b>	<b>H</b>	<b>Installment account</b> <b>2009-02-10</b>				<b>0.00</b>
ACCOUNT NO. <b>Jp Morgan Chase Bank</b> <b>Attn: Bankruptcy</b> <b>PO Box 15298</b> <b>Wilmington, DE 19850-5298</b>		<b>Assignee or other notification for:</b> <b>Jpm Chase</b>				
ACCOUNT NO. <b>05N1</b> <b>Little Company of Mary Hospital</b> <b>2800 W 95th St</b> <b>Evergreen Park, IL 60805-2701</b>		<b>2/2/10</b>				<b>115.00</b>
ACCOUNT NO. <b>Senex Services Corp</b> <b>3500 Depauw Blvd Ste 305</b> <b>Indianapolis, IN 46268-1170</b>		<b>Assignee or other notification for:</b> <b>Little Company of Mary Hospital</b>				
ACCOUNT NO. <b>Mea-Munster LLC</b> <b>901 Macarthur Blvd</b> <b>Munster, IN 46321-2901</b>	<b>H</b>	<b>Open account</b> <b>2015-02-01</b>				<b>124.00</b>
ACCOUNT NO. <b>Ars Account Resolution</b> <b>1643 NW 136th Ave Ste 1</b> <b>Sunrise, FL 33323-2857</b>		<b>Assignee or other notification for:</b> <b>Mea-Munster LLC</b>				
ACCOUNT NO. <b>5075</b> <b>MED1 02 Community Hospital</b> <b>901 Macarthur Blvd</b> <b>Munster, IN 46321-2901</b>	<b>H</b>	<b>Open account</b> <b>Unknown</b>				<b>278.00</b>

Sheet no. **15** of **29** continuation sheets attached to  
Schedule of Creditors Holding Unsecured Nonpriority ClaimsSubtotal  
(Total of this page) \$ **517.00**(Use only on last page of the completed Schedule F. Report also on  
the Summary of Schedules, and if applicable, on the Statistical  
Summary of Certain Liabilities and Related Data.)  
Total  
\$

IN RE Newman, Patrice R.

Case No. \_\_\_\_\_

Debtor(s)

(If known)

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
**(Continuation Sheet)**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. <b>Komyattcasb 9650 Gordon Dr Highland, IN 46322-2909</b>		<b>Assignee or other notification for: MED1 02 Community Hospital</b>				
ACCOUNT NO. <b>Komyatte &amp; Casbon Attn: Collections Department 9650 Gordon Dr Highland, IN 46322-2909</b>		<b>Assignee or other notification for: MED1 02 Community Hospital</b>				
ACCOUNT NO. 4048 <b>MED1 02 Mea Munster LLC 901 Macarthur Blvd Munster, IN 46321-2901</b>	H	<b>Open account Unknown</b>				<b>124.00</b>
ACCOUNT NO. <b>Ars 1801 NW 66th Ave Fort Lauderdale, FL 33313-4571</b>		<b>Assignee or other notification for: MED1 02 Mea Munster LLC</b>				
ACCOUNT NO. 1875 <b>Med1 02 Suk S Lee Md C/o Komyattassoc 9650 Gordon Dr Highland, IN 46322-2909</b>		<b>7/27/10</b>				<b>100.00</b>
ACCOUNT NO. <b>Melanie Cantorna 2446 W Harrison St Chicago, IL 60612-4086</b>						<b>2,250.00</b>
ACCOUNT NO. 4424 <b>Meridian Surgical Group Inc 13430 Old Meridian St # 275 Carmel, IN 46032-7119</b>	H	<b>Open account 2014-08-01</b>				<b>575.00</b>

Sheet no. 16 of 29 continuation sheets attached to  
Schedule of Creditors Holding Unsecured Nonpriority ClaimsSubtotal  
(Total of this page) \$ **3,049.00**(Use only on last page of the completed Schedule F. Report also on  
the Summary of Schedules, and if applicable, on the Statistical  
Summary of Certain Liabilities and Related Data.)  
Total  
\$

IN RE Newman, Patrice R.

Case No. \_\_\_\_\_

Debtor(s)

(If known)

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
**(Continuation Sheet)**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. <b>Gla Collection Co Inc</b> <b>2630 Gleeson Way</b> <b>Louisville, KY 40299-1772</b>		<b>Assignee or other notification for:</b> <b>Meridian Surgical Group Inc</b>				
ACCOUNT NO. <b>Gla Collection Company</b> <b>PO Box 991199</b> <b>Louisville, KY 40269-1199</b>		<b>Assignee or other notification for:</b> <b>Meridian Surgical Group Inc</b>				
ACCOUNT NO. <b>National Recovery Agency</b> <b>2491 Paxton St</b> <b>Harrisburg, PA 17111-1036</b>						<b>Unknown</b>
ACCOUNT NO. <b>New Age Chicago Furniture</b> <b>4238 S Cottage Grove Ave</b> <b>Chicago, IL 60653-2908</b>						<b>120.00</b>
ACCOUNT NO. <b>5714</b> <b>Northwest Radiology</b> <b>800 W Central Rd</b> <b>Arlington Heights, IL 60005-2349</b>	<b>H</b>	<b>Open account</b> <b>2014-08-01</b>				<b>413.00</b>
ACCOUNT NO. <b>Gla Collection Co Inc</b> <b>2630 Gleeson Way</b> <b>Louisville, KY 40299-1772</b>		<b>Assignee or other notification for:</b> <b>Northwest Radiology</b>				
ACCOUNT NO. <b>Gla Collection Company</b> <b>PO Box 991199</b> <b>Louisville, KY 40269-1199</b>		<b>Assignee or other notification for:</b> <b>Northwest Radiology</b>				

Sheet no. 17 of 29 continuation sheets attached to  
Schedule of Creditors Holding Unsecured Nonpriority ClaimsSubtotal  
(Total of this page) \$ **533.00**(Use only on last page of the completed Schedule F. Report also on  
the Summary of Schedules, and if applicable, on the Statistical  
Summary of Certain Liabilities and Related Data.)  
Total  
\$

IN RE Newman, Patrice R.

Debtor(s)

Case No. \_\_\_\_\_

(If known)

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
**(Continuation Sheet)**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 2392 Peoples Engy 200 E Randolph St Chicago, IL 60601-6436	H	Open account 2013-02-13				0.00
ACCOUNT NO. Peoples Gas Attention: Bankruptcy Department 130 E Randolph St Fl 17 Chicago, IL 60601-6207		Assignee or other notification for: Peoples Engy				
ACCOUNT NO. 5150 Peoples Engy 200 E Randolph St Chicago, IL 60601-6436	H	Open account 2012-08-21				0.00
ACCOUNT NO. Peoples Gas Attention: Bankruptcy Department 130 E Randolph St Fl 17 Chicago, IL 60601-6207		Assignee or other notification for: Peoples Engy				
ACCOUNT NO. 7382 Peoples Engy 200 E Randolph St Chicago, IL 60601-6436	H	Open account 2010-08-13				0.00
ACCOUNT NO. Peoples Gas Attention: Bankruptcy Department 130 E Randolph St Fl 17 Chicago, IL 60601-6207		Assignee or other notification for: Peoples Engy				
ACCOUNT NO. 9436 Peoples Engy 200 E Randolph St Chicago, IL 60601-6436	H	Open account 2009-04-02				0.00

Sheet no. 18 of 29 continuation sheets attached to  
Schedule of Creditors Holding Unsecured Nonpriority ClaimsSubtotal  
(Total of this page) \$(Use only on last page of the completed Schedule F. Report also on  
the Summary of Schedules, and if applicable, on the Statistical  
Summary of Certain Liabilities and Related Data.)  
Total  
\$

IN RE Newman, Patrice R.

Debtor(s)

Case No. \_\_\_\_\_

(If known)

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
**(Continuation Sheet)**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. <b>Peoples Gas</b> <b>Attention: Bankruptcy Department</b> <b>130 E Randolph St Fl 17</b> <b>Chicago, IL 60601-6207</b>		<b>Assignee or other notification for:</b> <b>Peoples Engy</b>				
ACCOUNT NO. <b>5076</b> <b>Peoples Engy</b> <b>200 E Randolph St</b> <b>Chicago, IL 60601-6436</b>	<b>H</b>	<b>Open account</b> <b>2011-11-02</b>				<b>0.00</b>
ACCOUNT NO. <b>Peoples Gas</b> <b>Attention: Bankruptcy Department</b> <b>130 E Randolph St Fl 17</b> <b>Chicago, IL 60601-6207</b>		<b>Assignee or other notification for:</b> <b>Peoples Engy</b>				
ACCOUNT NO. <b>0593</b> <b>Peoples Gas Light Coke Co</b> <b>130 E Randolph St</b> <b>Chicago, IL 60601-6207</b>	<b>H</b>	<b>Open account</b> <b>2014-10-01</b>				<b>575.00</b>
ACCOUNT NO. <b>Source Receivables Man</b> <b>PO Box 4068</b> <b>Greensboro, NC 27404-4068</b>		<b>Assignee or other notification for:</b> <b>Peoples Gas Light Coke Co</b>				
ACCOUNT NO. <b>PNC Bank</b> <b>249 5th Ave Ste 30</b> <b>Pittsburgh, PA 15222-2707</b>						<b>443.95</b>
ACCOUNT NO. <b>Allied Interstate</b> <b>PO Box 361774</b> <b>Columbus, OH 43236-1774</b>		<b>Assignee or other notification for:</b> <b>PNC Bank</b>				

Sheet no. **19** of **29** continuation sheets attached to  
Schedule of Creditors Holding Unsecured Nonpriority ClaimsSubtotal  
(Total of this page) \$ **1,018.95**(Use only on last page of the completed Schedule F. Report also on  
the Summary of Schedules, and if applicable, on the Statistical  
Summary of Certain Liabilities and Related Data.)  
Total  
\$

IN RE Newman, Patrice R.

Case No. \_\_\_\_\_

Debtor(s)

(If known)

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
**(Continuation Sheet)**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. <b>9959</b> <b>Rshk/cbna</b> <b>PO Box 6497</b> <b>Sioux Falls, SD 57117-6497</b>	<b>H</b>	<b>Revolving account</b> <b>2008-01-27</b>				<b>0.00</b>
ACCOUNT NO. <b>Rshk/cbsd</b> <b>Attn.: Citi Centralized Bankruptcy</b> <b>PO Box 20363</b> <b>Kansas City, MO 64195-0363</b>		<b>Assignee or other notification for:</b> <b>Rshk/cbna</b>				
ACCOUNT NO. <b>0072</b> <b>Rush Copley Medical Center</b> <b>2000 Ogden Ave</b> <b>Aurora, IL 60504-7222</b>	<b>H</b>	<b>Open account</b> <b>2010-10-01</b>				<b>250.00</b>
ACCOUNT NO. <b>Dsg Collect</b> <b>1824 W Grand Ave Ste 200</b> <b>Chicago, IL 60622-6721</b>		<b>Assignee or other notification for:</b> <b>Rush Copley Medical Center</b>				
ACCOUNT NO. <b>Diversified Svs Group</b> <b>Attention: Bankruptcy Department</b> <b>1824 W Grand Ave Ste 200</b> <b>Chicago, IL 60622-6721</b>		<b>Assignee or other notification for:</b> <b>Rush Copley Medical Center</b>				
ACCOUNT NO. <b>2075</b> <b>Sprint</b> <b>PO Box 4191</b> <b>Carol Stream, IL 60197-4191</b>	<b>H</b>	<b>Open account</b> <b>2015-02-01</b>				<b>1,115.00</b>
ACCOUNT NO. <b>Enhanced Recovery Co L</b> <b>8014 Bayberry Rd</b> <b>Jacksonville, FL 32256-7412</b>		<b>Assignee or other notification for:</b> <b>Sprint</b>				

Sheet no. 20 of 29 continuation sheets attached to  
Schedule of Creditors Holding Unsecured Nonpriority ClaimsSubtotal  
(Total of this page) \$ **1,365.00**(Use only on last page of the completed Schedule F. Report also on  
the Summary of Schedules, and if applicable, on the Statistical  
Summary of Certain Liabilities and Related Data.)  
Total  
\$

IN RE Newman, Patrice R.

Case No. \_\_\_\_\_

Debtor(s)

(If known)

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
**(Continuation Sheet)**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM, IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. <b>Enhanced Recovery Corp</b> <b>Attention: Client Services</b> <b>8014 Bayberry Rd</b> <b>Jacksonville, FL 32256-7412</b>		<b>Assignee or other notification for:</b> <b>Sprint</b>				
ACCOUNT NO. <b>6858</b> <b>Sprint</b> <b>PO Box 4191</b> <b>Carol Stream, IL 60197-4191</b>	<b>H</b>	<b>Open account</b> <b>2012-10-01</b>				<b>0.00</b>
ACCOUNT NO. <b>Receivables Performanc</b> <b>20816 44th Ave W</b> <b>Lynnwood, WA 98036-7744</b>		<b>Assignee or other notification for:</b> <b>Sprint</b>				
ACCOUNT NO. <b>Rcvl Per Mng</b> <b>Attn:Collections/Bankruptcy</b> <b>PO Box 1548</b> <b>Lynnwood, WA 98046-1548</b>		<b>Assignee or other notification for:</b> <b>Sprint</b>				
ACCOUNT NO. <b>9657</b> <b>St Vincent Hospital Health C</b> <b>2001 W 86th St</b> <b>Indianapolis, IN 46260-1902</b>	<b>H</b>	<b>Open account</b> <b>2014-09-01</b>				<b>0.00</b>
ACCOUNT NO. <b>Med-1 Solutions</b> <b>517 US Highway 31 N</b> <b>Greenwood, IN 46142-3932</b>		<b>Assignee or other notification for:</b> <b>St Vincent Hospital Health C</b>				
ACCOUNT NO. <b>Med-1 Sol</b> <b>517 US Highway 31 N</b> <b>Greenwood, IN 46142-3932</b>		<b>Assignee or other notification for:</b> <b>St Vincent Hospital Health C</b>				

Sheet no. 21 of 29 continuation sheets attached to  
Schedule of Creditors Holding Unsecured Nonpriority ClaimsSubtotal  
(Total of this page) \$(Use only on last page of the completed Schedule F. Report also on  
the Summary of Schedules, and if applicable, on the Statistical  
Summary of Certain Liabilities and Related Data.)  
Total  
\$

IN RE Newman, Patrice R.

Debtor(s)

Case No. \_\_\_\_\_

(If known)

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
**(Continuation Sheet)**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 9535 St Vincent Hospital Health C 2001 W 86th St Indianapolis, IN 46260-1902	H	Open account 2014-09-01				0.00
ACCOUNT NO. Med-1 Solutions 517 US Highway 31 N Greenwood, IN 46142-3932		Assignee or other notification for: St Vincent Hospital Health C				
ACCOUNT NO. Med-1 Sol 517 US Highway 31 N Greenwood, IN 46142-3932		Assignee or other notification for: St Vincent Hospital Health C				
ACCOUNT NO. 9032 St Vincent Physician Business 10330 N Meridian St Indianapolis, IN 46290-1024	H	Open account 2015-02-01				412.00
ACCOUNT NO. Med-1 Solutions 517 US Highway 31 N Greenwood, IN 46142-3932		Assignee or other notification for: St Vincent Physician Business				
ACCOUNT NO. Med-1 Sol 517 US Highway 31 N Greenwood, IN 46142-3932		Assignee or other notification for: St Vincent Physician Business				
ACCOUNT NO. 0681 St Vincent Physician Business 10330 N Meridian St Indianapolis, IN 46290-1024	H	Open account 2015-02-01				389.00

Sheet no. 22 of 29 continuation sheets attached to  
Schedule of Creditors Holding Unsecured Nonpriority ClaimsSubtotal  
(Total of this page) \$ **801.00**(Use only on last page of the completed Schedule F. Report also on  
the Summary of Schedules, and if applicable, on the Statistical  
Summary of Certain Liabilities and Related Data.)  
Total  
\$



IN RE Newman, Patrice R.

Debtor(s)

Case No. \_\_\_\_\_

(If known)

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
**(Continuation Sheet)**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. <b>Med-1 Solutions</b> <b>517 US Highway 31 N</b> <b>Greenwood, IN 46142-3932</b>		<b>Assignee or other notification for:</b> <b>St Vincent Physician Business</b>				
ACCOUNT NO. <b>Med-1 Sol</b> <b>517 US Highway 31 N</b> <b>Greenwood, IN 46142-3932</b>		<b>Assignee or other notification for:</b> <b>St Vincent Physician Business</b>				
ACCOUNT NO. <b>4194</b> <b>St Vincent Physician Business</b> <b>10330 N Meridian St</b> <b>Indianapolis, IN 46290-1024</b>	<b>H</b>	<b>Open account</b> <b>2014-12-01</b>				<b>223.00</b>
ACCOUNT NO. <b>Med-1 Solutions</b> <b>517 US Highway 31 N</b> <b>Greenwood, IN 46142-3932</b>		<b>Assignee or other notification for:</b> <b>St Vincent Physician Business</b>				
ACCOUNT NO. <b>Med-1 Sol</b> <b>517 US Highway 31 N</b> <b>Greenwood, IN 46142-3932</b>		<b>Assignee or other notification for:</b> <b>St Vincent Physician Business</b>				
ACCOUNT NO. <b>8571</b> <b>St Vincent Physician Business</b> <b>10330 N Meridian St</b> <b>Indianapolis, IN 46290-1024</b>	<b>H</b>	<b>Open account</b> <b>2014-12-01</b>				<b>102.00</b>
ACCOUNT NO. <b>Med-1 Solutions</b> <b>517 US Highway 31 N</b> <b>Greenwood, IN 46142-3932</b>		<b>Assignee or other notification for:</b> <b>St Vincent Physician Business</b>				

Sheet no. 23 of 29 continuation sheets attached to  
Schedule of Creditors Holding Unsecured Nonpriority ClaimsSubtotal  
(Total of this page) \$ **325.00**(Use only on last page of the completed Schedule F. Report also on  
the Summary of Schedules, and if applicable, on the Statistical  
Summary of Certain Liabilities and Related Data.)  
Total  
\$

IN RE Newman, Patrice R.

Case No. \_\_\_\_\_

Debtor(s)

(If known)

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
**(Continuation Sheet)**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. <b>Med-1 Sol</b> <b>517 US Highway 31 N</b> <b>Greenwood, IN 46142-3932</b>		<b>Assignee or other notification for:</b> <b>St Vincent Physician Business</b>				
ACCOUNT NO. <b>8570</b> <b>St Vincent Physician Business</b> <b>10330 N Meridian St</b> <b>Indianapolis, IN 46290-1024</b>	<b>H</b>	<b>Open account</b> <b>2014-12-01</b>				<b>102.00</b>
ACCOUNT NO. <b>Med-1 Solutions</b> <b>517 US Highway 31 N</b> <b>Greenwood, IN 46142-3932</b>		<b>Assignee or other notification for:</b> <b>St Vincent Physician Business</b>				
ACCOUNT NO. <b>Med-1 Sol</b> <b>517 US Highway 31 N</b> <b>Greenwood, IN 46142-3932</b>		<b>Assignee or other notification for:</b> <b>St Vincent Physician Business</b>				
ACCOUNT NO. <b>8572</b> <b>St Vincent Physician Business</b> <b>10330 N Meridian St</b> <b>Indianapolis, IN 46290-1024</b>	<b>H</b>	<b>Open account</b> <b>2014-12-01</b>				<b>79.00</b>
ACCOUNT NO. <b>Med-1 Solutions</b> <b>517 US Highway 31 N</b> <b>Greenwood, IN 46142-3932</b>		<b>Assignee or other notification for:</b> <b>St Vincent Physician Business</b>				
ACCOUNT NO. <b>Med-1 Sol</b> <b>517 US Highway 31 N</b> <b>Greenwood, IN 46142-3932</b>		<b>Assignee or other notification for:</b> <b>St Vincent Physician Business</b>				

Sheet no. 24 of 29 continuation sheets attached to  
Schedule of Creditors Holding Unsecured Nonpriority ClaimsSubtotal  
(Total of this page) \$ **181.00**(Use only on last page of the completed Schedule F. Report also on  
the Summary of Schedules, and if applicable, on the Statistical  
Summary of Certain Liabilities and Related Data.)  
Total  
\$

IN RE Newman, Patrice R.

Case No. \_\_\_\_\_

Debtor(s)

(If known)

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
**(Continuation Sheet)**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 4976 St. Vincent Emerg. Phys. Inc. 10330 N Meridian St Indianapolis, IN 46290-1024	H	Open account 2015-05-01				195.00
ACCOUNT NO. Imc Credit Services 6955 Hillisdale Ct Indianapolis, IN 46250-2054		Assignee or other notification for: St. Vincent Emerg. Phys. Inc.				
ACCOUNT NO. Imc Credit Services IMC Credit Services PO Box 20636 Indianapolis, IN 46220-0636		Assignee or other notification for: St. Vincent Emerg. Phys. Inc.				
ACCOUNT NO. State of Illinois Dept of Rev PO Box 19044 Springfield, IL 62794		back taxes greater than 3 years past due				3,678.00
ACCOUNT NO. State of Illinois Dept of Rev PO Box 19044 Springfield, IL 62794		back taxes greater than 3 years past due				2,641.00
ACCOUNT NO. 3531 Syncb/sams PO Box 965005 Orlando, FL 32896-5005	H	Revolving account 2004-05-23				0.00
ACCOUNT NO. Sams Club / Gemb Attention: Bankruptcy Department PO Box 103104 Roswell, GA 30076-9104		Assignee or other notification for: Syncb/sams				

Sheet no. 25 of 29 continuation sheets attached to  
Schedule of Creditors Holding Unsecured Nonpriority ClaimsSubtotal  
(Total of this page) \$ **6,514.00**(Use only on last page of the completed Schedule F. Report also on  
the Summary of Schedules, and if applicable, on the Statistical  
Summary of Certain Liabilities and Related Data.)  
Total  
\$

IN RE Newman, Patrice R.

Case No. \_\_\_\_\_

Debtor(s)

(If known)

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
**(Continuation Sheet)**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 3531 Synch/sams PO Box 965005 Orlando, FL 32896-5005	H	Revolving account 2004-05-23				0.00
ACCOUNT NO. Sams Club / Gemb Attention: Bankruptcy Department PO Box 103104 Roswell, GA 30076-9104		Assignee or other notification for: Synch/sams				
ACCOUNT NO. 3531 Synch/sams PO Box 965005 Orlando, FL 32896-5005	H	Revolving account 2004-05-23				0.00
ACCOUNT NO. Sams Club / Gemb Attention: Bankruptcy Department PO Box 103104 Roswell, GA 30076-9104		Assignee or other notification for: Synch/sams				
ACCOUNT NO. 7858 Synch/Walmart PO Box 965024 El Paso, TX 79998	H	Revolving account 2005-12-07				0.00
ACCOUNT NO. Synchrony Bank/Walmart Attn: Bankruptcy PO Box 103104 Roswell, GA 30076-9104		Assignee or other notification for: Synch/Walmart				
ACCOUNT NO. 5621 TCF Bank 715 Plainfield Rd Willowbrook, IL 60527-5377		1/13/09				140.00

Sheet no. 26 of 29 continuation sheets attached to  
Schedule of Creditors Holding Unsecured Nonpriority ClaimsSubtotal  
(Total of this page) \$ **140.00**(Use only on last page of the completed Schedule F. Report also on  
the Summary of Schedules, and if applicable, on the Statistical  
Summary of Certain Liabilities and Related Data.)  
Total  
\$

IN RE Newman, Patrice R.

Case No. \_\_\_\_\_

Debtor(s)

(If known)

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
**(Continuation Sheet)**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. <b>Professional Account Management Inc</b> <b>633 W Wisconsin Ave</b> <b>Milwaukee, WI 53203-1918</b>		<b>Assignee or other notification for:</b> <b>TCF Bank</b>				
ACCOUNT NO. <b>8160</b> <b>Thd/Cbna</b> <b>PO Box 6497</b> <b>Sioux Falls, SD 57117-6497</b>	<b>H</b>	<b>Revolving account</b> <b>2009-09-01</b>				<b>0.00</b>
ACCOUNT NO. <b>Citibank/the Home Depot</b> <b>Citicorp Credit Svcs/Centralized Bankrup</b> <b>PO Box 790040</b> <b>Saint Louis, MO 63179-0040</b>		<b>Assignee or other notification for:</b> <b>Thd/Cbna</b>				
ACCOUNT NO. <b>6132</b> <b>Turner Accep</b> <b>5900 Howard St</b> <b>Skokie, IL 60077-2627</b>	<b>H</b>	<b>Installment account</b> <b>2008-06-14</b>				<b>405.00</b>
ACCOUNT NO. <b>6132</b> <b>Turner Acceptance</b> <b>4450 N Western Ave</b> <b>Chicago, IL 60625-2115</b>		<b>6/14/08</b>				<b>405.00</b>
ACCOUNT NO. <b>1577</b> <b>US Dept of Ed/Glelsi</b> <b>PO Box 7860</b> <b>Madison, WI 53707-7860</b>	<b>H</b>	<b>Installment account</b> <b>2010-02-01</b>				<b>13,385.00</b>
ACCOUNT NO. <b>9577</b> <b>US Dept of Ed/Glelsi</b> <b>PO Box 7860</b> <b>Madison, WI 53707-7860</b>	<b>H</b>	<b>Installment account</b> <b>2009-02-01</b>				<b>12,806.00</b>

Sheet no. 27 of 29 continuation sheets attached to  
Schedule of Creditors Holding Unsecured Nonpriority ClaimsSubtotal  
(Total of this page) \$ **27,001.00**(Use only on last page of the completed Schedule F. Report also on  
the Summary of Schedules, and if applicable, on the Statistical  
Summary of Certain Liabilities and Related Data.)  
Total  
\$

IN RE Newman, Patrice R.

Case No. \_\_\_\_\_

Debtor(s)

(If known)

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
**(Continuation Sheet)**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. <b>8581</b> <b>US Dept of Ed/Glelsi</b> <b>PO Box 7860</b> <b>Madison, WI 53707-7860</b>	<b>H</b>	<b>Installment account</b> <b>2011-01-01</b>				<b>7,721.00</b>
ACCOUNT NO. <b>8921</b> <b>Village of Justice</b> <b>7800 Archer Rd</b> <b>Justice, IL 60458-1077</b>		<b>7/1/08</b>				<b>250.00</b>
ACCOUNT NO. <b>RM/MCSI</b> <b>3348 Ridge Rd</b> <b>Lansing, IL 60438-3112</b>		<b>Assignee or other notification for:</b> <b>Village of Justice</b>				
ACCOUNT NO. <b>8682</b> <b>Village of Justice</b> <b>7800 Archer Rd</b> <b>Justice, IL 60458-1077</b>		<b>7/1/08</b>				<b>250.00</b>
ACCOUNT NO. <b>RM/mcsi</b> <b>3348 Ridge Rd</b> <b>Lansing, IL 60438-3112</b>		<b>Assignee or other notification for:</b> <b>Village of Justice</b>				
ACCOUNT NO. <b>8870</b> <b>Village of Justice</b> <b>7800 Archer Rd</b> <b>Justice, IL 60458-1077</b>		<b>7/1/08</b>				<b>250.00</b>
ACCOUNT NO. <b>RM/MCSI</b> <b>3348 Ridge Rd</b> <b>Lansing, IL 60438-3112</b>		<b>Assignee or other notification for:</b> <b>Village of Justice</b>				

Sheet no. 28 of 29 continuation sheets attached to  
Schedule of Creditors Holding Unsecured Nonpriority ClaimsSubtotal  
(Total of this page) \$ **8,471.00**(Use only on last page of the completed Schedule F. Report also on  
the Summary of Schedules, and if applicable, on the Statistical  
Summary of Certain Liabilities and Related Data.)  
Total  
\$

IN RE Newman, Patrice R.

Debtor(s)

Case No.

(If known)

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. <b>7416</b> <b>Vincennes Court AP</b> <b>4832 S Vincennes Ave</b> <b>Chicago, IL 60615-1462</b>	<b>H</b>	<b>LawSuit account opened 11/3/2009</b>				<b>1,575.00</b>
ACCOUNT NO. <b>Miller &amp; Ferguson</b> <b>954W WASHNGTN 510</b> <b>chicago, IL 60607</b>		<b>Assignee or other notification for:</b> <b>Vincennes Court AP</b>				
ACCOUNT NO.						
ACCOUNT NO.						
ACCOUNT NO.						
ACCOUNT NO.						
ACCOUNT NO.						

Sheet no. **29** of **29** continuation sheets attached to  
Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal  
(Total of this page) \$ **1,575.00**

Total  
(Use only on last page of the completed Schedule F. Report also on  
the Summary of Schedules, and if applicable, on the Statistical  
Summary of Certain Liabilities and Related Data.) \$ **114,766.91**

SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser," "Agent," etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

☒ Check this box if debtor has no executory contracts or unexpired leases.

NAME AND MAILING ADDRESS, INCLUDING ZIP CODE OF OTHER PARTIES TO LEASE OR CONTRACT	DESCRIPTION OF CONTRACT OR LEASE AND NATURE OF DEBTOR'S INTEREST. STATE WHETHER LEASE IS FOR NONRESIDENTIAL REAL PROPERTY. STATE CONTRACT NUMBER OF ANY GOVERNMENT CONTRACT.



SCHEDULE H - CODEBTORS

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by the debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight-year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

☒ Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR	NAME AND ADDRESS OF CREDITOR

**Fill in this information to identify your case:**

Debtor 1 **Patrice R. Newman**  
First Name Middle Name Last Name

Debtor 2  
 (Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: Northern District of Illinois, Eastern Division

Case number  
 (if known) \_\_\_\_\_

Check if this is:

- ☐ An amended filing
- ☐ A supplement showing post-petition chapter 13 income as of the following date:

MM / DD / YYYY

**Official Form 6I**

**Schedule I: Your Income**

12/13

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

**Part 1: Describe Employment**

**1. Fill in your employment information.**

If you have more than one job, attach a separate page with information about additional employers.

Include part-time, seasonal, or self-employed work.

Occupation may include student or homemaker, if it applies.

**Employment status**

- ☐ Employed  
☐ Not employed

- ☐ Employed  
☐ Not employed

**Occupation**

insurance agent

**Employer's name**

GEICO

**Employer's address**

101 W 103rd St  
Number Street

Number Street

Indianapolis, IN 46290-1102

City State ZIP Code

City State ZIP Code

**How long employed there?** 1 years and 5 months

**Part 2: Give Details About Monthly Income**

**Estimate monthly income as of the date you file this form.** If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

**2. List monthly gross wages, salary, and commissions** (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

2. \$ 3,102.75

**3. Estimate and list monthly overtime pay.**

3. + \$ 0.00

**4. Calculate gross income.** Add line 2 + line 3.

4. \$ 3,102.75

**For Debtor 1**

**For Debtor 2 or non-filing spouse**

Debtor 1

**Patrice R. Newman**

First Name

Middle Name

Last Name

Case number (if known)

	For Debtor 1	For Debtor 2 or non-filing spouse
Copy line 4 here ..... → 4.	\$ <b>3,102.75</b>	\$ _____
<b>5. List all payroll deductions:</b>		
5a. Tax, Medicare, and Social Security deductions	5a. \$ <b>335.69</b>	\$ _____
5b. Mandatory contributions for retirement plans	5b. \$ <b>124.11</b>	\$ _____
5c. Voluntary contributions for retirement plans	5c. \$ <b>0.00</b>	\$ _____
5d. Required repayments of retirement fund loans	5d. \$ <b>0.00</b>	\$ _____
5e. Insurance	5e. \$ <b>314.71</b>	\$ _____
5f. Domestic support obligations	5f. \$ <b>0.00</b>	\$ _____
5g. Union dues	5g. \$ <b>0.00</b>	\$ _____
5h. Other deductions. Specify: _____	5h. + \$ <b>0.00</b>	+ \$ _____
6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h.	6. \$ <b>774.51</b>	\$ _____
7. Calculate total monthly take-home pay. Subtract line 6 from line 4.	7. \$ <b>2,328.24</b>	\$ _____
<b>8. List all other income regularly received:</b>		
8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a. \$ <b>0.00</b>	\$ _____
8b. Interest and dividends	8b. \$ <b>0.00</b>	\$ _____
8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c. \$ <b>0.00</b>	\$ _____
8d. Unemployment compensation	8d. \$ <b>0.00</b>	\$ _____
8e. Social Security	8e. \$ <b>0.00</b>	\$ _____
8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: _____	8f. \$ <b>0.00</b>	\$ _____
8g. Pension or retirement income	8g. \$ <b>0.00</b>	\$ _____
8h. Other monthly income. Specify: _____	8h. + \$ <b>0.00</b>	+ \$ _____
9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h.	9. <b>\$ 0.00</b>	<b>\$ _____</b>
10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. <b>\$ 2,328.24</b>	<b>\$ _____</b>
		<b>= \$ 2,328.24</b>
<b>11. State all other regular contributions to the expenses that you list in Schedule J.</b> Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: _____		
		11. + \$ <b>0.00</b>
12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies	12. <b>\$ 2,328.24</b> Combined monthly income	
13. Do you expect an increase or decrease within the year after you file this form?		
<input checked="" type="checkbox"/> No. <input type="checkbox"/> Yes. Explain: <b>None</b>		

## page 1

Debtor 1

**Patrice R. Newman**

First Name

Middle Name

Last Name

Case number (if known)

**Your expenses**

5. **Additional mortgage payments for your residence**, such as home equity loans

5. \$ **0.00**

6. **Utilities:**

6a. Electricity, heat, natural gas

6a. \$ **250.00**

6b. Water, sewer, garbage collection

6b. \$ **0.00**

6c. Telephone, cell phone, Internet, satellite, and cable services

6c. \$ **175.00**

6d. Other. Specify: \_\_\_\_\_

6d. \$ **0.00**

7. **Food and housekeeping supplies**

7. \$ **500.00**

8. **Childcare and children's education costs**

8. \$ **1,000.00**

9. **Clothing, laundry, and dry cleaning**

9. \$ **100.00**

10. **Personal care products and services**

10. \$ **100.00**

11. **Medical and dental expenses**

11. \$ **0.00**

12. **Transportation.** Include gas, maintenance, bus or train fare.

Do not include car payments.

12. \$ **250.00**

13. **Entertainment, clubs, recreation, newspapers, magazines, and books**

13. \$ **0.00**

14. **Charitable contributions and religious donations**

14. \$ **0.00**

15. **Insurance.**

Do not include insurance deducted from your pay or included in lines 4 or 20.

15a. Life insurance

15a. \$ **15.00**

15b. Health insurance

15b. \$ **0.00**

15c. Vehicle insurance

15c. \$ **61.00**

15d. Other insurance. Specify: \_\_\_\_\_

15d. \$ **0.00**

16. **Taxes.** Do not include taxes deducted from your pay or included in lines 4 or 20.

Specify: \_\_\_\_\_

16. \$ **0.00**

17. **Installment or lease payments:**

17a. Car payments for Vehicle 1

17a. \$ **137.00**

17b. Car payments for Vehicle 2

17b. \$ **0.00**

17c. Other. Specify: \_\_\_\_\_

17c. \$ **0.00**

17d. Other. Specify: \_\_\_\_\_

17d. \$ **0.00**

18. **Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 6I).**

18. \$ **0.00**

19. **Other payments you make to support others who do not live with you.**

Specify: \_\_\_\_\_

\$ **0.00**

19.

20. **Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.**

20a. Mortgages on other property

20a. \$ **0.00**

20b. Real estate taxes

20b. \$ **0.00**

20c. Property, homeowner's, or renter's insurance

20c. \$ **0.00**

20d. Maintenance, repair, and upkeep expenses

20d. \$ **0.00**

20e. Homeowner's association or condominium dues

20e. \$ **0.00**

Debtor 1

**Patrice R. Newman**

First Name

Middle Name

Last Name

Case number (if known) \_\_\_\_\_

21. **Other.** Specify: \_\_\_\_\_

21. **+\$ 0.00**

22. **Your monthly expenses.** Add lines 4 through 21.

The result is your monthly expenses.

22. **\$ 3,638.00**

23. **Calculate your monthly net income.**

23a. Copy line 12 (*your combined monthly income*) from *Schedule I*.

23a. **\$ 2,328.24**

23b. Copy your monthly expenses from line 22 above.

23b. **-\$ 3,638.00**

23c. Subtract your monthly expenses from your monthly income.

The result is your *monthly net income*.

23c. **\$ -1,309.76**

24. **Do you expect an increase or decrease in your expenses within the year after you file this form?**

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

☒ No.

☐ Yes.

None

IN RE Newman, Patrice R. Case No. \_\_\_\_\_  
Debtor(s) (If known)

**DECLARATION CONCERNING DEBTOR'S SCHEDULES**

**DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR**

I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of 40 sheets, and that they are true and correct to the best of my knowledge, information, and belief.

Date: September 29, 2015 Signature: Patrice R. Newman Debtor

Date: \_\_\_\_\_ Signature: \_\_\_\_\_  
(Joint Debtor, if any)  
[If joint case, both spouses must sign.]

**DECLARATION AND SIGNATURE OF NON-ATTORNEY BANKRUPTCY PETITION PREPARER (See 11 U.S.C. § 110)**

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342 (b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required by that section.

Printed or Typed Name and Title, if any, of Bankruptcy Petition Preparer \_\_\_\_\_ Social Security No. (Required by 11 U.S.C. § 110.)  
*If the bankruptcy petition preparer is not an individual, state the name, title (if any), address, and social security number of the officer, principal, responsible person, or partner who signs the document.*

Address \_\_\_\_\_

Signature of Bankruptcy Petition Preparer \_\_\_\_\_ Date \_\_\_\_\_

Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document, unless the bankruptcy petition preparer is not an individual:

*If more than one person prepared this document, attach additional signed sheets conforming to the appropriate Official Form for each person.*

*A bankruptcy petition preparer's failure to comply with the provision of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. § 110; 18 U.S.C. § 156.*

**DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF CORPORATION OR PARTNERSHIP**

I, the \_\_\_\_\_ (the president or other officer or an authorized agent of the corporation or a member or an authorized agent of the partnership) of the \_\_\_\_\_ (corporation or partnership) named as debtor in this case, declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of \_\_\_\_\_ sheets (*total shown on summary page plus 1*), and that they are true and correct to the best of my knowledge, information, and belief.

Date: \_\_\_\_\_ Signature: \_\_\_\_\_

(Print or type name of individual signing on behalf of debtor)

*[An individual signing on behalf of a partnership or corporation must indicate position or relationship to debtor.]*

*Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.*

Document Page 54 of 85  
United States Bankruptcy Court  
Northern District of Illinois, Eastern Division

IN RE:

Case No. \_\_\_\_\_

Newman, Patrice R.

Chapter 7

Debtor(s)

STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. **If the answer to an applicable question is "None," mark the box labeled "None."** If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

DEFINITIONS

*"In business."* A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

*"Insider."* The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any persons in control of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; any managing agent of the debtor. 11 U.S.C. § 101(2),(31).

1. Income from employment or operation of business

None ☐ State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT	SOURCE
24,813.00	2015 ytd income
20,000.00	2014 income approximatley
42,000.00	2013 income approximately

2. Income other than from employment or operation of business

None ☐ State the amount of income received by the debtor other than from employment, trade, profession, operation of the debtor's business during the **two years** immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT	SOURCE
800.00	2014 pension approximately
10,000.00	2014 unemployment compensation approximately



### 3. Payments to creditors

Complete a. or b., as appropriate, and c.

None ☒ a. *Individual or joint debtor(s) with primarily consumer debts:* List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within **90 days** immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

None ☒ b. *Debtor whose debts are not primarily consumer debts:* List each payment or other transfer to any creditor made within **90 days** immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$6,255.\* If the debtor is an individual, indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

\* Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

None ☒ c. *All debtors:* List all payments made within **one year** immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

### 4. Suits and administrative proceedings, executions, garnishments and attachments

None ☒ a. List all suits and administrative proceedings to which the debtor is or was a party within **one year** immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

None ☒ b. Describe all property that has been attached, garnished or seized under any legal or equitable process within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

### 5. Repossessions, foreclosures and returns

None ☒ List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

### 6. Assignments and receiverships

None ☒ a. Describe any assignment of property for the benefit of creditors made within **120 days** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and joint petition is not filed.)

None ☒ b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

### 7. Gifts

None ☒ List all gifts or charitable contributions made within **one year** immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

### 8. Losses

None ☒ List all losses from fire, theft, other casualty or gambling within **one year** immediately preceding the commencement of this case **or since the commencement of this case.** (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

### 9. Payments related to debt counseling or bankruptcy

None ☐ List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of a petition in bankruptcy within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE

Heller & Richmond, Ltd.  
33 N Dearborn St Ste 1907  
Chicago, IL 60602-3828

DATE OF PAYMENT, NAME OF  
PAYOR IF OTHER THAN DEBTOR  
9/29/15

AMOUNT OF MONEY OR DESCRIPTION  
AND VALUE OF PROPERTY  
950.00

**10. Other transfers**

None ☐ a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within **two years** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

None ☒ b. List all property transferred by the debtor within **ten years** immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

**11. Closed financial accounts**

None ☒ List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within **one year** immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

**12. Safe deposit boxes**

None ☒ List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

**13. Setoffs**

None ☒ List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within **90 days** preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

**14. Property held for another person**

None ☒ List all property owned by another person that the debtor holds or controls.

**15. Prior address of debtor**

None ☒ If debtor has moved within **three years** immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

**16. Spouses and Former Spouses**

None ☒ If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within **eight years** immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

**17. Environmental Information**

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law.

None ☒ a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law.

None ☐ b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

None ☐ c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

**18. Nature, location and name of business**

None ☐ a. *If the debtor is an individual*, list the names, addresses, taxpayer-identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within **six years** immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

*If the debtor is a partnership*, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within **six years** immediately preceding the commencement of this case.

*If the debtor is a corporation*, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

None ☐ b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

*[If completed by an individual or individual and spouse]*

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date: **September 29, 2015**

Signature  
of Debtor



**Patrice R. Newman**

Date: \_\_\_\_\_

Signature  
of Joint Debtor  
(if any)

\_\_\_\_\_ **0** continuation pages attached

*Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. § 152 and 3571.*

United States Bankruptcy Court  
Northern District of Illinois, Eastern Division

IN RE:

Newman, Patrice R.

Case No. \_\_\_\_\_

Chapter 7

Debtor(s)

**CHAPTER 7 INDIVIDUAL DEBTOR'S STATEMENT OF INTENTION**

**PART A** – Debts secured by property of the estate. (Part A must be fully completed for *EACH* debt which is secured by property of the estate. Attach additional pages if necessary.)

Property No. 1	
<b>Creditor's Name:</b> Title Max	<b>Describe Property Securing Debt:</b> 2006 Pontiac Grand Prix 4dr Sedan (3.8L 6cyl 4A)
Property will be (check one): <input checked="" type="checkbox"/> Surrendered <input type="checkbox"/> Retained  If retaining the property, I intend to (check at least one): <input type="checkbox"/> Redeem the property <input type="checkbox"/> Reaffirm the debt <input type="checkbox"/> Other. Explain _____ (for example, avoid lien using 11 U.S.C. § 522(f)).  Property is (check one): <input type="checkbox"/> Claimed as exempt <input checked="" type="checkbox"/> Not claimed as exempt	

Property No. 2 (if necessary)	
<b>Creditor's Name:</b>	<b>Describe Property Securing Debt:</b>
Property will be (check one): <input type="checkbox"/> Surrendered <input type="checkbox"/> Retained  If retaining the property, I intend to (check at least one): <input type="checkbox"/> Redeem the property <input type="checkbox"/> Reaffirm the debt <input type="checkbox"/> Other. Explain _____ (for example, avoid lien using 11 U.S.C. § 522(f)).  Property is (check one): <input type="checkbox"/> Claimed as exempt <input type="checkbox"/> Not claimed as exempt	

**PART B** – Personal property subject to unexpired leases. (All three columns of Part B must be completed for each unexpired lease. Attach additional pages if necessary.)

Property No. 1		
<b>Lessor's Name:</b>	<b>Describe Leased Property:</b>	Lease will be assumed pursuant to 11 U.S.C. § 365(p)(2): <input type="checkbox"/> Yes <input type="checkbox"/> No

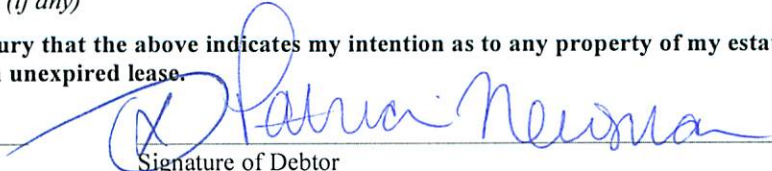
  

Property No. 2 (if necessary)		
<b>Lessor's Name:</b>	<b>Describe Leased Property:</b>	Lease will be assumed pursuant to 11 U.S.C. § 365(p)(2): <input type="checkbox"/> Yes <input type="checkbox"/> No

\_\_\_\_ continuation sheets attached (if any)

I declare under penalty of perjury that the above indicates my intention as to any property of my estate securing a debt and/or personal property subject to an unexpired lease.

Date: September 29, 2015

  
Signature of Debtor

\_\_\_\_\_  
Signature of Joint Debtor

IN RE:

Case No. \_\_\_\_\_

Newman, Patrice R.

Chapter 7 \_\_\_\_\_

Debtor(s)

**DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR**

1. Pursuant to 11 U.S.C. § 329(a) and Bankruptcy Rule 2016(b), I certify that I am the attorney for the above-named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

For legal services, I have agreed to accept ..... \$ \_\_\_\_\_

Prior to the filing of this statement I have received ..... \$ \_\_\_\_\_

Balance Due ..... \$ \_\_\_\_\_

2. The source of the compensation paid to me was: ☒ Debtor ☐ Other (specify):
3. The source of compensation to be paid to me is: ☒ Debtor ☐ Other (specify):
4. ☒ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.
- ☐ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached.
5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:
- a. ~~Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;~~
  - b. ~~Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;~~
  - c. ~~Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;~~
  - d. ~~Representation of the debtor in adversary proceedings and other contested bankruptcy matters;~~
  - e. [Other provisions as needed]

6. By agreement with the debtor(s), the above disclosed fee does not include the following services:

**CERTIFICATION**

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

**October 1, 2015**

Date

Michael R. Richmond 3124632  
Heller & Richmond, Ltd.  
33 N Dearborn St Ste 1907  
Chicago, IL 60602-3828  
(312) 781-6700 Fax: (312) 781-6732  
mrichmond@hellerrichmond.com

## ATTORNEY-CLIENT AGREEMENT

This Agreement is made this 5<sup>th</sup> day of August, 2015 by and between Heller & Richmond, Ltd. (hereinafter referred to as "Attorney") of 33 N. Dearborn St., Suite 1907, Chicago, IL 60602 Patrice R. Newman (hereinafter referred to as "Client") of Riverdale, IL

WHEREAS, "Client" desires to engage the legal services of "Attorney" to advise and represent "Client" concerning "Client's" desire to seek Bankruptcy relief pursuant to title 11 of the United States Code; and

WHEREAS, "Attorney" desires to provide such legal services to "Client":

IT IS HEREBY AGREED by and between the Parties hereto, in consideration of the mutual covenants contained herein:

### TERMS OF AGREEMENT

#### 1. Professional Legal Services to be Provided.

A. Attorney shall provide the following professional legal services for "Client" in the above referenced bankruptcy matter:

1. Analysis of the "Client's" financial situation and rendering advice to the "Client" in determining whether to file a petition in bankruptcy;
2. Preparation and filing of any petition, schedules, statement of affairs, or plan which may be required.
3. Representation of "Client" at the meeting of the creditors and confirmation hearing;
4. Other:

B. Professional legal services to be provided by "Attorney" to "Client" shall not include:

1. Rendering advice or representing any other person or entity related to or a dependent of "Client";
2. Filing a notice of appeal, or prosecuting or defending an appeal of any judicial ruling, except by separate agreement of the parties, hereto; or,
3. Representing "Client" in any other judicial or administrative or alternative dispute resolution proceeding, except by separate agreement of the parties, hereto;
4. The filing of any adversary complaint to determine the dischargeability of an otherwise non-dischargeable debt.

2. Compensation for Legal Service Provided. "Client" agrees to pay to "Attorney" and "Attorney" agrees to accept from "Client" \$950.00 for the performance of these services (hereinafter referred to as "fee") in addition to the costs of approximately three hundred eighty five dollars\*\* (\$385.00)

It is hereby acknowledged that this "fee" has been based upon "Client's" representation that he/she has the following type and number of debts:

- a. -2- secured creditors;
- b. -1- unsecured creditors; (**UP TO 30 UNSECURED CREDITORS**)
- c. -0- priority debts; (**GOVT. DEBT INCLUDING STUDENT LOAN IS GENERALLY NOT DISCHARGABLE**)

This stated "fee" has been further based upon "Client's" representation that he/she has:

- a. -0- law suits pending against him/her;
- b. -0- wage assignments pending against him/her.

"Client" agrees to pay an additional fee of one hundred dollars (\$100.00) for each of the following additional items that have not been disclosed above:

- a. each secured creditor;
- b. each group of up to ten unsecured creditors over the first ten unsecured creditors;
- c. each law suit or wage assignment pending against "Client" at the time the bankruptcy is filed;
- d. "Attorney" notification to the Secretary of State of the bankruptcy in the event "Client's" driving privileges had been previously suspended in accordance with the financial responsibility laws of the State of Illinois

"Client" also acknowledges that the "fee" has been determined based upon the minimal amount of expected work to be performed on this bankruptcy matter, and that if additional legal services, such as representing "Client" in contested matters or adversary proceedings, must be performed, *if "Client" fails to attend a meeting of the creditors or any court hearing or if the petition, once prepared, has to be revised due to "Client's" failure to provide complete or accurate information, including but not limited to the list of creditors as referred to in Section 5(f) below or if "Attorney" is forced to take any steps to collect any past due Attorneys fees from "Client", "Client" shall be responsible for additional fees at a rate of two hundred fifty dollars (\$250.00) per hour.*

"Client" agrees to pay all fees and court costs as follows:

1. \$500.00 upon the execution of this agreement;
2. Balance due prior to filing, but within 90 days

"Client" acknowledges that "Attorney" is not responsible for filing a petition or initiating any bankruptcy proceeding until "Client" has paid "Attorney" at least \$1,335.00 *and that any monies paid upon the execution of this agreement are non-refundable* and are intended to compensate "Attorney" for his time spent in compiling the information necessary to prepare, or other steps towards the preparation of, a petition in bankruptcy.

3. Client Cooperation. "Client" agrees to fully cooperate with "Attorney" in performing professional legal services, including, but not limited to, fully disclosing all of "Client's" potential assets and liabilities, timely appearing at meetings and hearings, promptly returning phone calls from "Attorney" to "Client", promptly communicating any changes in circumstances to "Attorney", including change of employment and change of address, and paying all legal fees and expenses as they become due. "Client" hereby warrants and covenants that he/she has fully disclosed to "Attorney" all known or suspected real property, tangible and intangible personal property, debts, leases contracts, claims in favor of or against "Client" and taxes owed.



4. Termination of Agreement.

A. "Client" may terminate this Agreement with "Attorney" at any time upon written notice to "Attorney". In the event of such termination, "Client" shall pay all legal fees incurred and shall notify "Attorney" in writing, if "Client" desires his/her file turned-over to any person or entity.

B. "Attorney" may terminate this Agreement upon written notice to "Client" for "cause". "Cause" shall include, but shall not be limited to the following:

1. "Attorney" learning of "Client's" intention to commit an act that may constitute a bankruptcy crime or fraud or other unlawful conduct, and "Client's" refusal to refrain from such conduct;
2. "Client's" failure to promptly pay legal fees or expenses incurred; or
3. Any other permissible or mandatory cause to withdraw from the Attorney-Client relationship as provided for in the Code of Professional Responsibility.

5. "Client" acknowledgment.

A. "Attorney" has advised "Client" that his/her spouse, if any is jointly liable for many of "Client's" debts that have been incurred, since the time of "Client's" marriage and that "Client's" spouse can be held responsible for these debts, unless the spouse files a joint or separate petition for bankruptcy. "Attorney" has advised "Client" that there would be no additional legal "fee" or court costs to add the "Client's" spouse on a joint petition for bankruptcy, provided that the spouse does not have any creditors other than those upon which "Client's" fee was based.

B. "Attorney" has advised "Client" that some debts may not be dischargeable and in particular, secured debts or those in which "Client" has pledged some property as collateral against a loan or other financing, are not dischargeable, unless "Client" is willing to return the property, which has been pledged as collateral, to the creditor. "Client" has been further advised that in many instances he/she may retain the property, which has been pledged as collateral, if he/she agree to reaffirm the debt and continue to pay the creditor, as they were bound to do, before the filing of bankruptcy.

C. "Attorney" has reviewed with "Client" his/her options to file under Chapter 7, Chapter 11 and Chapter 13 of Title 11 of the United States Code and "Client" has elected to proceed under Chapter 7 "Client" is aware that if he/she proceeds with a Chapter 7 then he/she will be required to forfeit any and all property owned in full or in part by "Client" other than those exemptions permitted by statute and in most instances the amount of property entitled to those exemptions is minimal. The property that could be forfeited includes, but is not limited to real estate, cash, bank accounts, household goods and furnishings, appliances, artwork, collections, sports equipment, tools, jewelry, income tax refunds, vehicles or anything else of value or potential value.

D. "Client" acknowledges that he/she has read both front and back of this agreement and "Attorney" has answered any questions that "Client" may have had about its content.

E. "Client" acknowledges receipt of a copy of this agreement at the time of its execution.

F. It is the obligation of "Client" to supply "Attorney" with a neat, legible and complete list of all creditors of "Client" and for each creditor include their complete name, address, account number and balance owed; also, if that account was referred to a collection agency or lawyer then also include the name, address and account number of the collection agency or lawyer.

G. "Client" understands that "Attorney's" obligation to represent "Client" will end no later than upon the entry of the Order of Discharge in Bankruptcy and "Client" will be responsible for payment of additional fees at the rate of two hundred dollars (\$200.00) per hour for any service that might be requested after the entry of the Order of Discharge including but not limited to telephone advice, file retrieval, providing copies of any file related documents and issues concerning credit bureau reports, obtaining credit or other forms of credit repair.

**H. "Client" hereby warrants and covenants that he/she has truthfully and fully disclosed to "Attorney" all known or suspected information requested by any aspect of the entire Bankruptcy Petition and that it is the responsibility of "Client" to be certain that this information is all accurately displayed in the actual Bankruptcy Petition at the time "Client" affixes his/her signature(s) thereto.**

\*\* costs include the court filing fee of \$335.00, the online prebankruptcy counseling of \$25.00\* and online debt management class of \$15.00\*, the 3-bureau credit report of \$38.00 per person and 3 years of tax transcripts at \$15.00 per tax year \*surcharge of \$9.95 per class/session if Client performs the service by telephone as opposed to online.

Heller & Richmond, Ltd.

By: 

HELLER & RICHMOND, LTD.  
33 N. Dearborn Street  
Suite 1907  
Chicago, IL 60602  
(312) 781-6700

I AGREE TO ALL THE TERMS CONTAINED IN THIS DOCUMENT

  
Patrice R. Newman

By affixing my signature above, I hereby certify that  
I have not filed any petition for bankruptcy within the  
past 8 years, except as otherwise noted as follows:

NONE

☒ **YES, I HEREBY INSTRUCT ATTORNEY TO PROVIDE CLIENT WITH A 3-BUREAU CREDIT REPORT and I AGREE TO PAY THE COST OF THIRTY FIVE DOLLARS (\$35.00) per person FOR THE REPORT IN ADDITION TO ALL OTHER FEES. This additional fee must be paid before the Bankruptcy Petition will be filed.**

United States Bankruptcy Court  
Northern District of Illinois, Eastern Division

IN RE:

Case No. \_\_\_\_\_

Newman, Patrice R.

Chapter 7

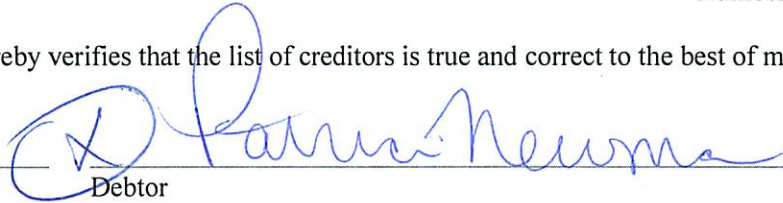
Debtor(s)

**VERIFICATION OF CREDITOR MATRIX**

Number of Creditors 62

The above-named Debtor(s) hereby verifies that the list of creditors is true and correct to the best of my (our) knowledge.

Date: September 29, 2015

A handwritten signature in blue ink, appearing to read "Patrice R. Newman", is written over a horizontal line. The signature is stylized with a large initial "P".

Debtor

\_\_\_\_\_  
Joint Debtor



01 Village of Hazel Crest  
3000 W 170th Pl  
Hazel Crest, IL 60429-1175

01 Village of Riverdale  
157 W 144th St  
Riverdale, IL 60827-2707

04 City of Elgin  
150 Dexter Ct  
Elgin, IL 60120-5527

10 Peoples Gas Light and Coke 266  
200 E Randolph St  
Chicago, IL 60601-6436

Acs/jp Morgan Chase Ba  
2277 E 22 oth St  
Long Beach, CA 90810

Acs/jpmchase  
2277 E 22 oth St  
Long Beach, CA 90810

Afni  
Attention: Bankruptcy  
1310 Martin Luther King Dr  
Bloomington, IL 61701-1465

Afni  
PO Box 3097  
Bloomington, IL 61702-3097

Afni, Inc.  
PO Box 3097  
Bloomington, IL 61702-3097

Allied Interstate  
PO Box 361774  
Columbus, OH 43236-1774

Americash Loans LLC  
PO Box 184  
Des Plaines, IL 60016-0003

Armon  
6N048 Old Homestead Rd  
Saint Charles, IL 60175-6126

Ars  
1801 NW 66th Ave  
Fort Lauderdale, FL 33313-4571

Ars Account Resolution  
1643 NW 136th Ave Ste 1  
Sunrise, FL 33323-2857

Asset Acceptance  
28405 Van Dyke Ave  
Warren, MI 48093-7132

Associates of Triangle  
PO Box 577798  
Chicago, IL 60657-7339

AT&T Bankruptcy Dept  
AT& T Bankruptcy Department  
PO Box 769  
Arlington, TX 76004-0769

AT&T Wireless Bankruptcy Dept.  
AT&T Wireless Bankruptcy Dept.  
PO Box 309  
Portland, OR 97207-0309

Atg Credit  
1700 W Cortland St Ste 2  
Chicago, IL 60622-1131

BANK OF AMERICA, Headquarters  
100 N Tryon St  
Charlotte, NC 28202-4000

Baxter Credit Union  
400 Lakeview Pkwy  
Vernon Hills, IL 60061-1843

Baxter Ecu/BCU  
340 N Milwaukee Ave  
Vernon Hills, IL 60061-1533

Benedictine University  
5700 College Rd  
Lisle, IL 60532-2851

Cap One  
PO Box 85520  
Richmond, VA 23285-5520

Capital One  
PO Box 5253  
Carol Stream, IL 60197-5253

Capital One  
Attn: Bankruptcy  
PO Box 30285  
Salt Lake City, UT 84130-0285

Capital One Bank USA N  
PO Box 30281  
Salt Lake City, UT 84130-0281

Cbna  
PO Box 6497  
Sioux Falls, SD 57117-6497

Cci  
PO Box 2207  
Augusta, GA 30903-2207

Chase Bank  
PO Box 182223  
Columbus, OH 43218-2223

Citi/Stdnt Ln Rsrc Cnt  
701 E 60th St N  
Sioux Falls, SD 57104-0432

Citibank  
701 E 60th St N  
Sioux Falls, SD 57104-0432

Citibank/the Home Depot  
Citicorp Credit Svcs/Centralized Bankrup  
PO Box 790040  
Saint Louis, MO 63179-0040

Citistudentln  
PO Box 95  
Sioux Falls, SD 57101-0095

City of Chicago  
Office of Dept of Finance  
121 N La Salle St Rm 107A  
Chicago, IL 60602-1232

Cmpptnrs/il Bened Coll  
PO Box 3176  
Winston Salem, NC 27102-3176

Comcast  
PO Box 3002  
Southeastern, PA 19398-3002

ComEd  
2100 Swift Dr  
Oak Brook, IL 60523-1559

Credit Management LP  
4200 International Pkwy  
Carrollton, TX 75007-1912

Credit One Bank NA  
PO Box 98875  
Las Vegas, NV 89193-8875

Dept of Employment Security State of IL  
PO Box 7350  
Chicago, IL 60680-7350

Diversified Svs Group  
Attention: Bankruptcy Department  
1824 W Grand Ave Ste 200  
Chicago, IL 60622-6721

Dr John Irving DDS Pc  
567 S Washington St  
Naperville, IL 60540-6756

Dreyer Medical Clinic  
c/o Illinois Collection Services  
8231 185th St  
Tinley Park, IL 60487-9355

Ds Waters of America  
c/o CBA Collection Bureau  
25954 Eden Landing Rd  
Hayward, CA 94545-3816

Dsg Collect  
1824 W Grand Ave Ste 200  
Chicago, IL 60622-6721

DuPage County Clerk  
c/o Alliance  
6565 Kimball Dr  
Gig Harbor, WA 98335-1200

Enhanced Recovery Co L  
8014 Bayberry Rd  
Jacksonville, FL 32256-7412

Enhanced Recovery Company, LLC  
PO Box 23870  
Jacksonville, FL 32241-3870

Enhanced Recovery Corp  
Attention: Client Services  
8014 Bayberry Rd  
Jacksonville, FL 32256-7412

First Midwest Bank Joliet  
300 N Hunt Club Rd  
Gurnee, IL 60031-2502

First National Bank  
Attn: FNN Legal Dept  
1620 Dodge St Stop Code3290  
Omaha, NE 68197-0003

First Premier Bank  
PO Box 5524  
Sioux Falls, SD 57117-5524

First Premier Bank  
601 S Minnesota Ave  
Sioux Falls, SD 57104-4824

Gary A. Smiley  
4741 N Western Ave  
Chicago, IL 60625-2012

Gecrb/sams Club  
PO Box 981400  
El Paso, TX 79998-1400



Genesis Financial Services  
3175 Commercial Ave Ste 201  
Northbrook, IL 60062-1924

Gla Collection Co Inc  
2630 Gleeson Way  
Louisville, KY 40299-1772

Gla Collection Company  
PO Box 991199  
Louisville, KY 40269-1199

Great American Finance  
Attn: Bankruptcy  
20 N Wacker Dr Ste 2275  
Chicago, IL 60606-3096

Great American Finance  
20 N Wacker Dr Ste 2275  
Chicago, IL 60606-3096

Horizon Card  
1707 Warren Rd  
Indiana, PA 15701-2423

Hsbc Bank Nevada N.A.  
PO Box 2013  
Buffalo, NY 14240-2013

I C System Inc  
PO Box 64378  
Saint Paul, MN 55164-0378

Ic System  
Attn: Bankruptcy  
444 Highway 96 E  
Saint Paul, MN 55127-2557

Imc Credit Services  
6955 Hillisdale Ct  
Indianapolis, IN 46250-2054

Imc Credit Services  
IMC Credit Services  
PO Box 20636  
Indianapolis, IN 46220-0636

Indiana Phys. Management LLC  
2001 W 86th St  
Indianapolis, IN 46260-1902

Internal Revenue Service  
Insolvency Section  
PO Box 7346  
Philadelphia, PA 19101-7346

Islander LLC  
1924 Broadway St  
Blue Island, IL 60406-3054

Jp Morgan Chase Bank  
Attn: Bankruptcy  
PO Box 15298  
Wilmington, DE 19850-5298

Jpm Chase  
PO Box 7013  
Indianapolis, IN 46207-7013

Komyatte & Casbon  
Attn: Collections Department  
9650 Gordon Dr  
Highland, IN 46322-2909

Komyattecasb  
9650 Gordon Dr  
Highland, IN 46322-2909

Little Company of Mary Hospital  
2800 W 95th St  
Evergreen Park, IL 60805-2701

Louis A. Weinstock  
20 N Clark St Ste 2600  
Chicago, IL 60602-5106

McSi Inc  
PO Box 327  
Palos Heights, IL 60463-0327

Mea-Munster LLC  
901 Macarthur Blvd  
Munster, IN 46321-2901

Med-1 Sol  
517 US Highway 31 N  
Greenwood, IN 46142-3932

Med-1 Solutions  
517 US Highway 31 N  
Greenwood, IN 46142-3932

MED1 02 Community Hospital  
901 Macarthur Blvd  
Munster, IN 46321-2901

MED1 02 Mea Munster LLC  
901 Macarthur Blvd  
Munster, IN 46321-2901

Med1 02 Suk S Lee Md  
C/o Komyattassoc  
9650 Gordon Dr  
Highland, IN 46322-2909

Melanie Cantorna  
2446 W Harrison St  
Chicago, IL 60612-4086

Meridian Surgical Group Inc  
13430 Old Meridian St # 275  
Carmel, IN 46032-7119

Miller & Ferguson  
954W WASHNGTN 510  
chicago, IL 60607

Municollofam  
3348 Ridge Rd  
Lansing, IL 60438-3112

National Recovery Agency  
2491 Paxton St  
Harrisburg, PA 17111-1036

New Age Chicago Furniture  
4238 S Cottage Grove Ave  
Chicago, IL 60653-2908

Northwest Radiology  
800 W Central Rd  
Arlington Heights, IL 60005-2349

Peoples Engy  
200 E Randolph St  
Chicago, IL 60601-6436

Peoples Gas  
Attention: Bankruptcy Department  
130 E Randolph St Fl 17  
Chicago, IL 60601-6207

Peoples Gas Light Coke Co  
130 E Randolph St  
Chicago, IL 60601-6207

PNC Bank  
249 5th Ave Ste 30  
Pittsburgh, PA 15222-2707

Portfolio Recovery  
Attn: Bankruptcy  
PO Box 41067  
Norfolk, VA 23541-1067

Portfolio Recovery Ass  
120 Corporate Blvd Ste 1  
Norfolk, VA 23502-4962

Professional Account Management Inc  
633 W Wisconsin Ave  
Milwaukee, WI 53203-1918

Rcvl Per Mng  
Attn: Collections/Bankruptcy  
PO Box 1548  
Lynnwood, WA 98046-1548

Receivables Performanc  
20816 44th Ave W  
Lynnwood, WA 98036-7744

RMI/MCSI  
3348 Ridge Rd  
Lansing, IL 60438-3112

Rshk/cbna  
PO Box 6497  
Sioux Falls, SD 57117-6497

Rshk/cbsd  
Attn.: Citi Centralized Bankruptcy  
PO Box 20363  
Kansas City, MO 64195-0363

Rush Copley Medical Center  
2000 Ogden Ave  
Aurora, IL 60504-7222

Sams Club / Gemb  
Attention: Bankruptcy Department  
PO Box 103104  
Roswell, GA 30076-9104

Sanjay Jutla  
11 E Adams St # 906  
Chicago, IL 60603-6306

Senex Services Corp  
3500 Depauw Blvd Ste 305  
Indianapolis, IN 46268-1170

Source Receivables Man  
PO Box 4068  
Greensboro, NC 27404-4068

Sprint  
PO Box 4191  
Carol Stream, IL 60197-4191

St Vincent Hospital Health C  
2001 W 86th St  
Indianapolis, IN 46260-1902

St Vincent Physician Business  
10330 N Meridian St  
Indianapolis, IN 46290-1024

St. Vincent Emerg. Phys. Inc.  
10330 N Meridian St  
Indianapolis, IN 46290-1024

State of Illinois  
509 S 6th St  
Springfield, IL 62701-1809



State of Illinois Dept of Rev  
PO Box 19044  
Springfield, IL 62794

Stellar Recovery Inc  
4500 Salisbury Rd Ste 10  
Jacksonville, FL 32216-0959

Syncb/sams  
PO Box 965005  
Orlando, FL 32896-5005

Syncb/Walmart  
PO Box 965024  
El Paso, TX 79998

Synchrony Bank/Walmart  
Attn: Bankruptcy  
PO Box 103104  
Roswell, GA 30076-9104

TCF Bank  
715 Plainfield Rd  
Willowbrook, IL 60527-5377

Thd/Cbna  
PO Box 6497  
Sioux Falls, SD 57117-6497

Title Max  
933 E Sibley Blvd  
Dolton, IL 60419-2139

Trackers Inc  
1970 Spruce Hills Dr  
Bettendorf, IA 52722-2681

Turner Accep  
5900 Howard St  
Skokie, IL 60077-2627

Turner Acceptance  
4450 N Western Ave  
Chicago, IL 60625-2115

US Dept of Ed/Glelsi  
PO Box 7860  
Madison, WI 53707-7860

Village of Justice  
7800 Archer Rd  
Justice, IL 60458-1077

Vincennes Court AP  
4832 S Vincennes Ave  
Chicago, IL 60615-1462

West Asset Management  
1000 N Travis St Ste F  
Sherman, TX 75090-5054

Western Control Services  
730 W Hampden Ave Ste 30  
Englewood, CO 80110-2120

## UNITED STATES BANKRUPTCY COURT

### NOTICE TO CONSUMER DEBTOR(S) UNDER §342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a **joint case** (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly-addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

#### **1. Services Available from Credit Counseling Agencies**

**With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis.** The briefing must be given within 180 days **before** the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

**In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge.** The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

#### **2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors**

##### **Chapter 7: Liquidation (\$245 filing fee, \$75 administrative fee, \$15 trustee surcharge: Total fee \$335)**

Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, the United States trustee (or bankruptcy administrator), the trustee, or creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your

discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

**Chapter 13: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$75 administrative fee: Total fee \$310)**

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

**Chapter 11: Reorganization (\$1167 filing fee, \$550 administrative fee: Total fee \$1717)**

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

**Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$75 administrative fee: Total fee \$275)**

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

**3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials**

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

**WARNING:** Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The documents and the deadlines for filing them are listed on Form B200, which is posted at [http://www.uscourts.gov/bkforms/bankruptcy\\_forms.html#procedure](http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure).

United States Bankruptcy Court  
Northern District of Illinois, Eastern Division

IN RE:

Case No. \_\_\_\_\_

Newman, Patrice R.

Chapter 7

Debtor(s)

**CERTIFICATION OF NOTICE TO CONSUMER DEBTOR(S)  
UNDER § 342(b) OF THE BANKRUPTCY CODE**

**Certificate of [Non-Attorney] Bankruptcy Petition Preparer**

I, the [non-attorney] bankruptcy petition preparer signing the debtor's petition, hereby certify that I delivered to the debtor the attached notice, as required by § 342(b) of the Bankruptcy Code.

Printed Name and title, if any, of Bankruptcy Petition Preparer  
Address:

Social Security number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person, or partner of the bankruptcy petition preparer.)  
(Required by 11 U.S.C. § 110.)

X

Signature of Bankruptcy Petition Preparer of officer, principal, responsible person, or partner whose Social Security number is provided above.

**Certificate of the Debtor**

I (We), the debtor(s), affirm that I (we) have received and read the attached notice, as required by § 342(b) of the Bankruptcy Code.

Newman, Patrice R.  
Printed Name(s) of Debtor(s)

X

Signature of Debtor

9/29/2015

Date

Case No. (if known) \_\_\_\_\_

X

Signature of Joint Debtor (if any)

Date

**Instructions:** Attach a copy of Form B 201A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) **only** if the certification has **NOT** been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

Document Page 85 of 85  
United States Bankruptcy Court  
Northern District of Illinois, Eastern Division

IN RE:

Case No. \_\_\_\_\_

Newman, Patrice R.

Chapter 7

Debtor(s)

**CERTIFICATION OF NOTICE TO CONSUMER DEBTOR(S)  
UNDER § 342(b) OF THE BANKRUPTCY CODE**

**Certificate of [Non-Attorney] Bankruptcy Petition Preparer**

I, the [non-attorney] bankruptcy petition preparer signing the debtor's petition, hereby certify that I delivered to the debtor the attached notice, as required by § 342(b) of the Bankruptcy Code.

Printed Name and title, if any, of Bankruptcy Petition Preparer  
Address:

Social Security number (If the bankruptcy  
petition preparer is not an individual, state  
the Social Security number of the officer,  
principal, responsible person, or partner of  
the bankruptcy petition preparer.)  
(Required by 11 U.S.C. § 110.)

**X** \_\_\_\_\_  
Signature of Bankruptcy Petition Preparer of officer, principal, responsible person, or  
partner whose Social Security number is provided above.

**Certificate of the Debtor**

I (We), the debtor(s), affirm that I (we) have received and read the attached notice, as required by § 342(b) of the Bankruptcy Code.

**Newman, Patrice R.** \_\_\_\_\_  
Printed Name(s) of Debtor(s)

**X** \_\_\_\_\_ **10/01/2015**  
Signature of Debtor Date

Case No. (if known) \_\_\_\_\_

**X** \_\_\_\_\_  
Signature of Joint Debtor (if any) Date

**Instructions:** Attach a copy of Form B 201A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) **only** if the certification has **NOT** been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.